

RECEIVED

NOV - 3 2015

NAPA COUNTY
EXECUTIVE OFFICE

County Executive Office

1195 Third Street, Suite 310
Napa, CA 94559
www.countyofnapa.org

Main: (707) 253-4421
Fax: (707) 253-4176

Nancy Watt
County Executive Officer



A Tradition of Stewardship
A Commitment to Service

October 5, 2015

Todd Walker

Napa CA 94558

Re: Napa County Airport Advisory Commission

Dear Mr. Walker:

The term of your position representing the Napa County Airport Advisory Commission expires on December 31, 2015.

If you wish to request reappointment, please check the boxes below, sign where indicated, and return this letter to the County Executive Office. When the letter has been returned, your name will be forwarded to the Board of Supervisors for consideration for reappointment to another three-year term, as you have been a valued member of the Napa County Airport Advisory Commission.

If any of the information on your last application for appointment has changed or is 5 years or older please complete a new application online at www.countyofnapa.org , and submit the completed new application when returning this letter.



Yes, I would like my name, this letter and application forwarded to the Board of Supervisors for possible reappointment to the Napa County Airport Advisory Commission for the term commencing immediately and expiring December 31, 2018.



I confirm by signing below that all the information on my application is current; or



Some of the information on my prior application is no longer correct. A new application is attached.

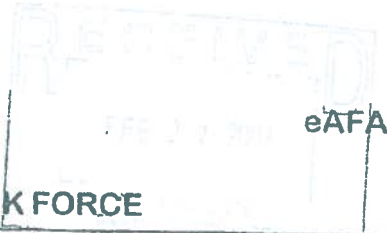

SIGNATURE


DATE

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County Executive Office
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Napa, CA 94559-3082
(707) 253-4421 FAX (707) 253-4176



APPLICATION FOR APPOINTMENT TO BOARD, COMMISSION, COMMITTEE OR TASK FORCE

PLEASE TYPE OR PRINT (Complete pages 1 through 3)

*Application for Appointment to: (Name of Board, Commission, Committee or Task Force)

Airport Advisory

*Category of membership for which you are applying:
(This information can be found on the news release announcing the opening.
You may apply for more than one category if more than one position is open.)

reapply/ citizen

*Supervisory District in which you reside:

Luce

*Full Name

Todd Walker

Date

2/26/2007

*Current Occupation (within the last twelve (12) months):

Manager/Owner Trucking

Current License (Professional or Occupational); Date of issue and/or expiration including status:

Education/Experience: (A resume may be attached containing this and any other information that would be helpful to the Board in evaluating your application.)

Community participation (nature of activity and community location):

Other County Board/Commission/Committee on which you serve/have served:

currently serve on this one

* Denotes Mandatory Entry Required

Application for Appointment to: (Name of Board, Commission, Committee or Task Force)

Airport Advisory

Names, addresses and phone numbers of three (3) individuals familiar with your background:

*Name

Ken Lydon

*Address

*City

Napa

*State *Zip Code

CA

94558

*Telephone

*Name

Mike Ledwich

*Address

*City

Napa

*State *Zip Code

CA

94559

*Telephone

*Name

Mike Murray

*Address

*City

Napa

*State *Zip Code

CA

94558

*Telephone

Name and occupation of spouse within the last 12 months, if married (for Conflict of Interest purposes):

*Please explain your reasons for wishing to serve and, in your opinion, how you feel you could contribute:

currently on commission

Application for Appointment to: (Name of Board, Commission, Committee or Task Force)

Airport Advisory

APPLICANTS APPOINTED BY THE BOARD OF SUPERVISORS WILL BE REQUIRED TO TAKE AN OATH OF OFFICE.

PLEASE NOTE THAT APPOINTEES MAY BE REQUIRED BY STATE LAW AND COUNTY CONFLICT OF INTEREST CODE TO FILE FINANCIAL DISCLOSURE STATEMENTS.

All applications will be kept on file for one year from the date of application

PERSONAL INFORMATION

The following information is provided in confidence to the extent that it will not be posted on the Internet, but may be used by the Board of Supervisors when making the appointment, or be used by the committee/commission/board/task force following appointment for purposes of communicating with the appointee.

Full Name

Todd Walker

*e-mail Address

*Home Address

*Work Address

*City

Napa

State

CA

*Zip Code

94558

*City

Napa

State

CA

Zip Code

94559

*Telephone

Telephone

Please Read!