

County Executive Office 1195 Third Street, Room 310 Napa, CA 94559-3082 (707) 253-4421 FAX (707) 253-4176

CAFA

APPLICATION FOR APPOINTMENT TO BOARD, COMMISSION, COMMITTEE OR TASK FORCE 1.7

PLEASE TYPE OR PRINT (Complete pages 1 through 3)				
*Application for Appointment to: (Name of Board, Commission, Committee or Task Force)				
NAPA VALLEY HOUSING COnition				
*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.) *Supervisorial District in which you reside: 3				
*Full Name Date				
CRISTOBAL FLORES CARATACHEA 4/25/2007				
*Current Occupation (within the last twelve (12) months):				
CAMPESINO (FARMWORKER) 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.)				
4 ANOS DE ESCUELA PRIMARIA EN MEXICO				
Community participation (nature of activity and community location):				
NINCANO				
Other County Board/Commission/Committee on which you serve/have served:				
Gaaduia				
MUGONO				

^{*} Denotes Mandatory Entry Required

Application for Appointment to	(Name of Board, Commis	sion. Committee or Tas	sk Force)
Names, addresses and phone	numbers of three (3) individu	als familiar with your bac *Name	ckground:
*Name		MANUEL	ESPINUZA
*Address		*Address	
Address Address			
*City	*State *Zip Code	*City	*State *Zip Code
			9
*Telephone		*Telephone	
*Name	· · · ·		
GERARDO SERI	JIN		
*Address			
*Cib	*State *Zip Code		
*City	State Zip Gode		
*Telephone			
Name and occupation of spous	e within the last 12 months, if	married (for Conflict of I	nterest purposes):
GRACIELA RODRI	GUEZ AMA	DE CASA	= HOUSE WIFE
*Please explain your reasons for	or wishing to serve and, in you	ur opinion, how you feel y	you could contribute:
40 CREO OUE E	L MEJOR REPR	ESENTANTE P	ARA LOS
CAMPESINOS SI	ELÍA UN CAMPE	SINO, ALGUIEN	QUE SÍ
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LOS MISMOS, E	STA SERIA N	in MEJOR 10	DUTRIBUCION:
			ES UNA BUENA
REPRESENTA			
SABER DUE	UN CAMPESI	NO HABLA	POR LOS
CAMPESI			

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

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		*e-mail Address
CEISTOBAL FLORES CARATACHEA		DINGUNO
*Home Address		*Work Address
		<u> </u>
*City	State *Zip Code	*City-106 WINEDALE LANE State Zip Code
*Telephone		Telephone
Please Read!		