

\* Denotes Mandatory Entry Required

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



## APPLICATION FOR APPOINTMENT TO BOARD, COMMISSION, COMMITTEE OR TASK FORGEROUNTY

*Application for Appointment to: (Name of Board, Commission	on Committee or Task Force)
Napa County Housing Commission	
*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:
vivienda de campesino, Mondavi e49 d.5 /	Three
*Full Name	Date
Rafael Limon	6/6/2007
*Current Occupation (within the last twelve (12) months):	
laborer, farmworker / Modavi	
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	her information that would be helpful to the Board in evaluating your application.)
none	
Community participation (nature of activity and community loca	ition):
none	
Other County Peard/Commission/Com	
Other County Board/Commission/Committee on which you serv	re/nave served:

pplication for Appointment to: (Name of Board, Comm	ission, Committee or Tas	k Force)
Napa County Housing Commission		
ames, addresses and phone numbers of three (3) individ	duals familiar with your bac	kground:
Name	*Name	
Ramon Liamas	Luis Llmas	
Address	*Address	
city *State *Zip Code	*City	*State *Zip Code
		(62,00) (0.46,00)
elephone	*Telephone	
elepitorie	relephone	genian-point-nation-garmany
ame		
anic		
ddress		
ity *State *Zip Code		
elephone		
me and occupation of spouse within the last 12 months,	if married (for Conflict of In	terest purposes):
ease explain your reasons for wishing to serve and, in yo	our opinion, how you feel yo	ou could contribute:

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

Napa County Housing Commission

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.

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Full Name		*e-mail Address	
Rafael Limon		ninguno	
*Home Address		*Work Address	
*City	State *Zîp Code	*City	State Zip Code
*Telephone		Telephone	
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Please Read!			