

MEASURE C CITIZEN OVERSIGHT COMMITTEE

Citizen Oversight Committee – APPLICATION FORM

(Please print legibly or type)

Name of Applica	nt: Chairmiller				
	Residenti	al Information			
City: State/Zip Code:	2820 E. Millor Fresho UA 93710 Cgete Deomcas		Cell Phone:	(Optional)	
Employment Information					
Employer:	Retired	States	mployee		
			Phone:		
State/Zip Code:					
E-mail:		ty Requirement			

By signing this application form I hereby certify that:

- 1. I am a U.S. citizen 18 years of age or older and reside within Fresno County.
- 2. I am not an elected official at any level of government
- 3. I am not a public employee from Fresno County, nor of any of the incorporated cities in Fresno County, Caltrans, the Fresno County Transportation Authority (Authority), or the Council of Fresno County Governments (Fresno COG).
- 4. I have no economic interest in any of the Authority's projects.
- 5. I will submit an annual statement of financial disclosure consistent with Fair Political Practices Commission (FPPC) rules and regulations to be filed with the Authority.

Area or Community Represented

I wish to be considered for the following position(s) - Check one or more box(es) below to affirm

your interes	st:
	Community Organization representative: (See requirement below) Attach a letter of recommendation from the organization you wish to represent on the Citizen Oversight Committee
	Unincorporated rural area west of State Route 99 (supervisorial district 1) Fresno-Clovis Metropolitan Area (supervisorial district 2)
	Fresno-Clovis Metropolitan Area (Any of the supervisorial districts)
	Additional Information
Transported that the	

and expenditures are spendas promised to the public. Furthermore, I believe my professional background as a Transportation Planiner who was responsible for the delivery and oversight of millions of dollars of transportation projects on and off of the state highway system which would make mea valuable addition to the committee.

Required Signature

I declare under penalty of perjury the above information is true and correct.

Date: Applicant: Signature		
Resume or letters of recommendation may be attached. All Community Organization applicants must provide a letter of recommendation from the organization they propose to represent.		
RETURN COMPLETED, SIGNED APPLICATION and other required documentation to:		
Measure C COC c/o Brenda Veenendaal Fresno COG 2035 Tulare Street, Suite 201 Fresno, CA 93721		
Email: brendav@fresnocog.org		
Telephone: 559.233.4148 ext. 219		
APPLICATIONS WILL BE KEPT ON FILE FOR TWO YEARS.		
OFFICE USE ONLY:		
DATE STAMP OR DATE RECEIVED:		



When women empower each other, successful things happen

January 6, 2020

Dear Ms. Veenendaal,

It's our pleasure to recommend one of our WE members and a dear friend, Gail Miller, to the Measure "C" Citizen Oversight Committee. Gail has been an excellent role model and inspiration to the women of our community. We can always count on Gail to come to our meetings well prepared. Gail has an excellent rapport with everyone which, helps her connect with people of all ages. Her ability to Listen respectfully to others points of views is an important asset on our committee.

We are confident that Gail can prove to be a valuable addition to your committee. Gail's 21 years with Caltrans her background in transportation in addition, to her experience serving as ex-officio on the Fresno County Association of Government policy board. We are confident that Gail can prove to be a valuable addition to your committee.

If you have any questions about Gail and what makes her uniquely qualified for this honor, please call me at (559) 978-9268, and I will be happy to talk to you anytime.

Respectively,

Karol Bourdet, Membership Chair

Kairl Brundel