NOYO HARBOR COMMISSION

APPLICATION FOR APPOINTMENT

INFORMATION:

The Noyo Harbor Commission, consisting of five members, is the governing body of the Noyo Harbor District; a special public district and political subdivision of the State of California organized under §6200, et seq. of the California Harbors and Navigation Code. The Commission has the ultimate authority of and directs all phases of operations of the Noyo Mooring Basin at Noyo Harbor; plans for the future use and development of Harbor District property and facilities; represents the Noyo Harbor District in contacts with Federal, State, County, City and other public and private agencies; supervises the preparation of and adopts the annual budget. The Commissioners are not compensated for their service to the Harbor District. The Commission meets regularly on the second Thursday of the month.

INSTRUCTIONS:

Please provide the information requested and any additional information you feel would be useful to the City Council in making their selection.

	NAME: Michael Campbell
	RESIDENT ADDRESS:
	MAILING ADDRESS:
	HOME PHONE: BUSINESS PHONE:
	BUSINESS ADDRESS:
	OCCUPATION: Painting Contractor/Commercial tisher man
	E-MAIL ADDRESS:
Brief st	ratement:
1.	Why are you interested in serving as one of the two City of Fort Bragg representatives on the Noyo Harbor District Board? Live and run a bus from dolphin Isle. Also a Commercial fisherman Out of the harbor.
2.	List property owned, businesses owned or other financial interest you may have in the Noyo Harbor District area. Trent a space of Dolphin Isle and run my Painting Business out of Dolphin Isle (Coastal Painting)
NOTE:	If appointed, commissioners are required to complete Fair Political Practices Commission (FPPC) financial disclosure forms.

COMPLETED APPLICATIONS SHOULD BE RETURNED BY 5:00 PM, October 17, 2022 TO:

June Lemos, MMC, City Clerk CITY OF FORT BRAGG 416 North Franklin Street Fort Bragg, California 95437

RECEIVED



OCT 17 2022

EDUCATION AND TRAINING

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Board position		<u>L</u>									
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performed and/or the which may relate to the	skills you acquired	Resid	estal Paint	ins							
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Mo. Yr.	TO: Mo. Yr.	Employer (Business or Agenc	y Name)			Title o	of your p	ositio	n	
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