APPLICATION FOR "COUNTY OF SANTA BARBARA CITIZENS' INDEPENDENT REDISTRICTING COMMISSION"

Applications Due By: August 21, 2020, 5:00PM
Application Revised: 6/29/2020
Date Received:

INSTRUCTIONS: Please complete each item below and sign the application. For more information please review the ordinance, visit the redistricting webpage at: www.countyofsb.org/redistricting or email questions to redistricting@countyofsb.org.

Please print legibly in ink or type. When completed, print and sign the application. Submit the application by mail, drop off or email as listed on the signature page.

1. Today's Date: 20-Aug-2020

2. NAME:

Last	First	Middle
Sullivan	James	N

[redacted]

Santa Maria (City) 93454 (Zip Code)

[redacted]

6. Are you or have you been employed by the County of Santa Barbara? ☐ YES ■ No If YES, list:

Department: Title: Date:

Demographic Section: Providing this information is optional. You may select "decline to state" for each answer. County Ordinance Code Section 2-10.9A, (4)(h)(3) requires six of the 11 appointees, in addition to meeting minimum requirements, be chosen in a way that ensures the Commission reflects the County's diversity, including racial, ethnic, geographic, age, and gender diversity. However, formulas or specific ratios shall not be applied for this purpose.

7. Please describe your ethnic origin. Mark one or more boxes.

☐ BLACK/AFRICAN AMERICAN: All persons having origins in any of the original Black racial groups of Africa.

☐ HISPANIC/LATINO: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

☐ ASIAN: All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

☐ NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER: All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

☐ AMERICAN INDIAN/ALASKA NATIVE: All persons having origins in any of the original peoples of North and South America (including Central America), and who maintain cultural affiliation or community recognition.

■ WHITE (not of Hispanic Origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

☐ Decline to state

8. Select the gender you identify as:

☐ Female ■ Male ☐ Non-Binary ☐ Decline to state

9. What is your age: 61 ☐ Decline to state

10. EXPERIENCE: Please explain why you are interested in serving and what experience you bring to the Commission. Attach an additional page if necessary.

I have no direct experience with local government activities or politics and am thus unencumbered by any "baggage" associated with existing district boundary considerations. I have no preconceived notion of how county districts should be drawn and can approach this task from a fresh perspective.

As an engineer by education and training (now retired), I bring to the table the ability to assess facts in an emotion-free and analytical manner. I have an untarnished moral character, I'm honest in my dealings with others, and strive to be a person of integrity in all respects. I believe in being respectful of those whose opinions differ from mine.

I would be honored to be able to serve my community in this manner.

11. ADDITIONAL INFORMATION: Give any other relevant information pertaining to your qualifications and experience that bear on your application for the Commission.

***Required Selection Criteria: Please answer the following yes/no questions.**

*Are you a resident of the County of Santa Barbara?

■ Yes ☐ No

*Are you registered to vote in the County of Santa Barbara?

■ Yes ☐ No

*Have you changed your registered political party affiliation within the past 5 years?

☐ Yes ■ No

*Have you voted in Santa Barbara County in at least one of the last three statewide elections?

■ Yes ☐ No

*I have read and comply with the provisions of Elections Code § 23003(c), (d) and (e).

■ Yes ☐ No

*Do you have any significant financial interest, as defined in County Ordinance Sec. 2-10.9A. - Citizens' Independent Redistricting Commission, in any company, corporation or other business entity that has donated five hundred dollars or more in one year to any candidate for elective office of the County of Santa Barbara, or to any controlled committee, primarily formed committee, general purpose committee, independent expenditure committee that expended funds in support or opposition to a candidate for elective office of the County of Santa Barbara within the last eight years preceding appointment to the commission?

☐ Yes ■ No

*Have you or any immediate family member, within the last eight years preceding appointment to the commission, contributed five hundred dollars or more in one year to any candidate controlled committee, primarily formed committee, or general purpose committee, independent expenditures committee or other political action committee that has expended more than one thousand dollars in support or in opposition to the election campaign for any elective office of the County of Santa Barbara?

☐ Yes ■ No

*Have you or any immediate family member, within the last eight years preceding appointment to the commission, been a board member, officer, paid or volunteer staff of, or had a significant influence on the actions or decisions of a political committee required to register with the California Secretary of State, which expended funds in excess of five hundred dollars in support or opposition to a candidate for any elective office of the County of Santa Barbara, including member communications.

☐ Yes ☒ No

How this application will be used:

I understand the contents of this application may be made available to the public including posting on the internet.

☒ Yes, I understand

I understand that while this application is a public document, my personal e-mail address, street address, and phone number(s) will be kept confidential to the extent authorized by law.

☒ Yes, I understand

By signing below, I declare under penalty of perjury that the answers provided in this application are true to the best of my knowledge.

Signature: JM Dallin 20-Aug-2020

Completed applications must be received by Friday, August 21, 2020 at 5 p.m. Double check your answers in the application; once submitted, applications cannot be amended. Incomplete applications will not be considered.

OPTION 1:

Mail To:
Joseph E. Holland
Redistricting Commission
County Clerk, Recorder, Assessor, Registrar of Voters
P.O. Box 159
Santa Barbara, CA 93102-0159

Drop Off in Person To:
Joseph E. Holland Redistricting Commission Assessor's Office
105 E. Anapamu St, Room 204 Santa Barbara, CA 93101

OPTION 2:

E-mail your completed application. Ensure the application is signed (no e-signatures), then e-mail the application to: redistricting@countyofsb.org

For more information please review the ordinance, visit the redistricting webpage at: www.countyofsb.org/redistricting or email questions to redistricting@countyofsb.org.