

Profile

[REDACTED]

Email Address

Susan

First Name

A

Middle Initial

Feighery

Last Name

[REDACTED]

Street Address

[REDACTED]

Suite or Apt

STOCKTON

City

CA

State

[REDACTED]

Postal Code

[REDACTED]

Ethnicity

[REDACTED]

Gender

If selected "Other," please specify.

District 6

What district do you live in?

Yes - Susan A Feighery

I declare under penalty of disqualification/termination
that I have been a resident at the above address for
years/months?

[REDACTED]

Primary Phone

[REDACTED]

Alternate Phone

The City of Stockton uses email as the preferred method of communication regarding your application. Is this acceptable to you?

☒ Yes ☐ No

If you have checked "No", please identify how you prefer
to be contacted:

[REDACTED]

Employer

[REDACTED]

Job Title

[REDACTED]

Occupation

Employer Address

[REDACTED]

Are you currently serving on a City of Stockton Board, Commission, or Committee?

☒ Yes ☐ No

If yes, please list

Community Advisory Board (CAB) with Chief Eric Jones. Mayor's Commission on Animal Welfare (This Commission may be ending d/t regular electoral changes)

Which Boards would you like to apply for?

Mayor's Task Force for Persons with Disabilities, San Joaquin County Mosquito And Vector Control District

Question applies to multiple boards.

Are you knowledgeable, have experience in, or extensive background in any of the following areas? Select all that apply. *

- ☐ Active in community activities significant enough to confirm knowledge of issues and individuals within the community
- ☐ Activist for the Visual Environment, Public Art, or Regional/National Individual Artists' work
- ☐ Critic of Contemporary Visual Art Forums
- ☐ Employed as a Professional Visual Artist
- ☐ Knowledge of new artistic & design expressions
- ☐ Possess decision-making abilities
- ☐ Understanding of Ethnic/Gender Diversity
- ☐ Understanding of the Stockton Public Art Plan processes and implications for the City of Stockton
- ☐ Willingness to tolerate/promote change
- ☐ None of the above

I have been a resident of Stockton for at least 3 years.

☒ Yes ☐ No

Interests & Experiences

Please tell us about yourself and why you want to serve.

I have lived in Stockton for 17 years and was recently looking for pathways to become more actively involved in serving the Stockton Community. My first step was to be selected to participate in "Leadership Stockton" through the Chamber of Commerce. This experience is really helping me begin to understand different avenues of service, Board participation being one of the keys of service. I have worked with people with disabilities for over 25 years. This included the men/women returning from the current conflicts. I am a disabled veteran myself. (I apologize as it looks like I am running out of time to get this application in on time, so I must stop here.) Please do see my attached resume.

Please state the reason you would like to be a member of this board/commission.

I am currently a member of "Leadership Stockton - Class of 2017." We have been encouraged to continue to serve the City of Stockton by volunteering to serve on a local Board. Adam Cheshire, CEO of Stockton Men and Women's Shelter presented to our group today. He stated that "Leadership Stockton serves as an incubator to train you for board leadership." I was very struck by his statement and feel I have a lot to offer the City of Stockton through Board membership.

Have you served on an advisory group before?

☒ Yes ☐ No

If yes, please explain.

Please see resume.

How did you hear about the position?

Encouragement by Leadership Stockton Class of 2017

City Council Policy 100-2 states that Commissioners are required to attend meetings on a regular basis. If appointed, will you be able to attend meetings regularly and devote the time necessary to fulfill your duties as a member?

☒ Yes ☐ No

Do you or immediate family members have any relationship (professional, financial, other) that may present a potential conflict of interest for this advisory group?

☐ Yes ☒ No

If yes, please explain

Background Information

Upload a Resume

Based on your best judgment, does this Commission make decisions that may affect any sources of income, interests in real property, or investments of you or your spouse?

☐ Yes ☒ No

Voter Registration (Questions appear if required)

Question applies to multiple boards.

Question applies to multiple boards.

I consent to the City of Stockton verifying my voter registration, if required.

☒ Yes ☐ No

Question applies to multiple boards.

If your name, address, city or zip code are different on your voter registration, please explain and give us the correct information below:



Submit Application

Please identify any specialized accommodations needed for equal participation:

I walk with a forearm crutch and require a chair with arms.

SAF

Enter Your Initials:

10fEB17

Date Signed

Profile

[REDACTED]

Email Address

Gary

First Name

R

Middle Initial

Lambdin

Last Name

[REDACTED]

Street Address

[REDACTED]

Suite or Apt

Stockton

City

CA

State

[REDACTED]

Postal Code

[REDACTED]

Ethnicity

[REDACTED]

Gender

If selected "Other," please specify.

District 4

What district do you live in?

18+

I declare under penalty of disqualification/termination
that I have been a resident at the above address for
years/months?

[REDACTED]

Primary Phone

[REDACTED]

Alternate Phone

The City of Stockton uses email as the preferred method of communication regarding your application. Is this acceptable to you?

☒ Yes ☐ No

If you have checked "No", please identify how you prefer
to be contacted:

Employer

Job Title

Occupation

Employer Address

Are you currently serving on a City of Stockton Board, Commission, or Committee?

☒ Yes ☐ No

If yes, please list

San Joaquin County Mosquito & Vector Control District Stockton Successor Agency Oversight Board

Which Boards would you like to apply for?

San Joaquin County Mosquito And Vector Control District

Question applies to multiple boards.

Are you knowledgeable, have experience in, or extensive background in any of the following areas? Select all that apply. *

- ☒ Active in community activities significant enough to confirm knowledge of issues and individuals within the community
- ☒ Possess decision-making abilities
- ☒ Understanding of Ethnic/Gender Diversity
- ☒ Willingness to tolerate/promote change

I have been a resident of Stockton for at least 3 years.

☒ Yes ☐ No

Interests & Experiences

Please tell us about yourself and why you want to serve.

My career has been in agricultural sciences and I am familiar with issues this board has encountered. I have served on this board for four years, the past two as President and chair of the Executive Committee. I was an intern for the SJCM&VCD while going to college.

Please state the reason you would like to be a member of this board/commission.

I would be honored to be appointed to represent the City of Stockton and continue the ongoing work to control West Nile virus throughout the City of Stockton.

Have you served on an advisory group before?

☒ Yes ☐ No

If yes, please explain.

Stockton Successor Agency Oversight Board

How did you hear about the position?

Current member

City Council Policy 100-2 states that Commissioners are required to attend meetings on a regular basis. If appointed, will you be able to attend meetings regularly and devote the time necessary to fulfill your duties as a member?

☒ Yes ☐ No

Do you or immediate family members have any relationship (professional, financial, other) that may present a potential conflict of interest for this advisory group?

☐ Yes ☒ No

If yes, please explain

Background Information

Upload a Resume

Based on your best judgment, does this Commission make decisions that may affect any sources of income, interests in real property, or investments of you or your spouse?

☐ Yes ☒ No

Voter Registration (Questions appear if required)

Question applies to multiple boards.

Question applies to multiple boards.

I consent to the City of Stockton verifying my voter registration, if required.

☒ Yes ☐ No

Question applies to multiple boards.

If your name, address, city or zip code are different on your voter registration, please explain and give us the correct information below:

[Redacted text]

Submit Application

Please identify any specialized accommodations needed for equal participation:

rgl

Enter Your Initials:

Jan 4, 2017

Date Signed

