

Profile

Email Address

Phillip

R

Herrera

First Name

Middle Initial

Last Name

Street Address

Stockton

CA

City

State

Postal Code

Ethnicity

Gender

What district do you live in? *

☒ District 4

Primary Phone

Alternate Phone

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

☒ Yes ☐ No

Employer

Job Title

Occupation

Employer Address

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

☐ Yes ☒ No

Which Boards would you like to apply for?

Community Development Committee: Submitted

Question applies to multiple boards

NOTE: This Board requires membership with one of the following groups. If none, please remove board from your application. 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

Interests & Experiences

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

I was born and raised in Stockton and want to be part of making our great city better.

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

As a former tax auditor, current business owner, and consultant to the Governor's Office of Business and Economic Development I believe my experience would be an excellent fit for the Measure W committee

Have you served on an advisory group before?

☒ Yes ☐ No

If yes, please explain.

Measure W, California Life Sciences Association; Miracle Mile Improvement District Board Member

How did you hear about the position?

fellow stocktonian

City Council Policy 3.03 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

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)

Submit Application

Please identify any specialized accommodations needed for equal participation:

None

Enter Your Initials:

PRH

Date Signed

12/26/2025