



MENDOCINO COUNTY BOARD OF SUPERVISORS
APPOINTMENT OF INTEREST APPLICATION

Committee Name: Community-Based Advisory Redistricting Commission **Date:** 7/28/21

Representational Category: Committee Member

Name: Kyle Farmer **Phone:** [REDACTED]

Address: [REDACTED]

Address (Mailing): [REDACTED] **E-mail:** [REDACTED]

Availability to Attend Meetings:

Night Meetings yes **Day Meetings** yes

Ukiah Only preferred **Other** [REDACTED]

Special Expertise, Experience, or Interest in This Area:

[REDACTED]
[REDACTED]
[REDACTED]

Degree in international relations (political science) and have studied mediation.

Are you an elected County official? Yes ☐ No ☒

Are you campaign staff for an elected County official? Yes ☐ No ☒

Are you a family member of an elected County official? Yes ☐ No ☒

I hereby certify that I am a resident of the County of Mendocino, and will be at least 18 years of age at the time of the next election. I certify under penalty of perjury, under the laws of the State of California, that the information on this application is true and correct.

I understand that assuming this public responsibility could result in public knowledge of my background and/or qualifications, including financial interests.

Applications will be kept on file for ten years.

Signature: [REDACTED] **Dated:** 7/28/21

Return completed application to:
The Mendocino County Executive Office
501 Low Gap Road, Room 1010
Ukiah, CA 95482
or email to: redistricting@mendocinocounty.org