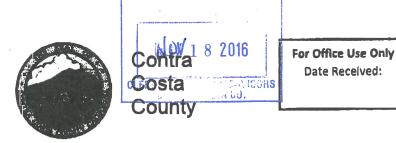
MAIL OR DELIVER TO: Contra Costa County



For Reviewers Use Only: Accepted Rejected

## BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

CLERK OF THE BOARD 651 Pine Street, Rm. 108 Martinez, California 94553-1292 PLEASE TYPE OR PRINT IN INK (Each Position Requires a Separate Application) BOARD, COMMITTEE OR COMMISSION NAME AND SEAT TITLE YOU ARE APPLYING FOR: At-Large **Aviation Advisory Committee** PRINT EXACT SEAT NAME (If applicable) PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION **Bruce** Geoffrey 1. Name: Logan (Middle Name) (Last Name) (First Name) Walnut Creek CA 94595 2. Address: (ZIp Code) (State) (Apt.) (City) (No.) (Street) 3. Phones: (Cell No.) (Home No.) (Work No.) 4. Email Address: 5. EDUCATION: Check appropriate box if you possess one of the following: High School Diploma Z G.E.D. Certificate California High School Proficiency Certificate Give Highest Grade or Educational Level Achieved 8.A. Political Science Date Degree Degrae Names of colleges / universities Course of Study / Major **Units Completed** Degree Awarded Туре attended Awarded Samester Quarter Yes No 🖾 🗀 BA 1983 Iniv of Cal-Santa Barbara Political Science B) Yes No 🗆 🗆 C) Yes No 🔲 🔲 Hours Completed Certificate Awarded: Course Studied D) Other schools / training Yes No 🔲 completed:

6. PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience, A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.

A) Dates (Month, Day, Year)	Title	Duties Performed
1 11 1	Aviation insurance underwriter	
1987   1997	Employer's Name and Address	
Total: Yrs. Mos.  10  2  Hrs. per week 40+ . Volunteer		Aviation insurance underwriter
B) Dates (Month, Day, Year)	Title	Duties Performed
From To	Aviation region manager	·
1997 2002	Employer's Name and Address	
Total: Yrs, Mos.  5  3  Hrs. per week 50+ Volunteer	AJ Gallagher & Co., Pleasanton, CA	Ran western region, US, aviation insurance broker.
C) Dates (Month, Day, Year)	Title	Duties Performed
From To	President	
\		II .
2002 Present	Employer's Name and Address	
Total: Yrs. Mos.  15  Hrs. per week	Employer's Name and Address  Business Aviation Insurance Services, Inc.	
Total: Yrs. Mos.  15  Hrs. per week		and risk management.
Total: Yrs. Mos.  15  Hrs. per week Volunteer   D) Dates (Month, Day, Year)  From TQ	Business Aviation Insurance Services, Inc.	Duties Performed  Service in the ALUC to secure the health, safety and welfare of the
Total: Yrs. Mos.  15  Hrs. per week Volunteer  D) Dates (Month, Day, Year)	Business Aviation Insurance Services, Inc. Title	Duties Performed  Service in the ALUC to secure the

now are you round about the vacancy r
□CCC Homepage Walk-In Newspaper Advertisement □District Supervisor ☑Other referrals
8. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No 🗵 Yes 🗍
If Yes, piesse identify the nature of the relationship:
8. Do you have any financial relationships with the County such as grants, contracts, or other economic relations?  No 🗵 Yes 🔲
if Yee, please identify the nature of the relationship:
CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and pellef, and are made in good faith. I acknowledge and understand that all information in this application is publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee on Committee in Committee of my rights to serve
Bign Name:

## **Important Information**

- 1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
- 2. Send the completed paper application to the Office of the Clerk of the Board at: 651 Pine Street, Room 106, Martinez, CA 94553.
- 3. A résumé or other relevant information may be submitted with this application.
- 4. All members are required to take the following training: 1) The Brown Act, 2) The Better Government Ordinance, and 3) Ethics Training.
- 5. Members of boards, commissions, and committees may be required to: 1) file a Statement of Economic Interest Form also known as a Form 700, and 2) complete the State Ethics Training Course as required by AB 1234.
- 6. Advisory body meetings may be held in various locations and some locations may not be accessible by public transportation.
- 7. Meeting dates and times are subject to change and may occur up to two days per month.
- 8. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.