

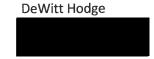
Contra Costa County
CLERK BOARD OF SUPERVISORS
CONTRA COSTA CO.
CONTRA COS

Re: Aviation Advisory Committee, At-Large Seat Application

Hello,

Please accept my attached application for the Contra Costa County Aviation Advisory Committee, At-Large Seat currently open.

From March 2014 to March 2017 I served on the Aviation Advisory Committee (AAC) as an At-Large member, including two terms as its Secretary. I found the service to our community and the airport staff rewarding. I very much look forward to another opportunity to serve.



August 9, 2017



For Office Use Only Date Received: For Reviewers Use Only:
Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

MAIL OR DELIVER TO:
Contra Costa County
CLERK OF THE BOARD
651 Pine Street, Rm. 106
Martinez, California 94553-1292
PLEASE TYPE OR PRINT IN INK
(Each Position Requires a Separate Application)

D) Other schools / training

Private Pilot Certificate

completed:



Certificate Awarded:

Yes No x

Aviation Advisory Committee RINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION		At-Large At-Large				
		PRINT EXACT SEAT NAME (if applicable)				
Nama Hodge	Г	DeWitt				
. Name: Hodge (Last Name)	(First Name) (Middle Name			ne)		
Address:						
(No.)	(Street)	(Apt.) (City)	(State)		(Zip Code
. Phones:						
(Home No.)	(Work No.)	(Ce	ll No.)			
. Email Address: [
EDUCATION: Check appropr				ertificate 🔲		
Email Address: Email Address: EDUCATION: Check appropriate School Diploma G.E.D. The Highest Grade or Education	Certificate Californi	a High School Pro	ficiency Ce			
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EDUCATION: Check appropriate the School Diploma G.E.D. The Highest Grade or Education Names of colleges / universities attended	Certificate Californial Californial Level Achieved Mas	a High School Proters Degree in Busi	ness Admin	istration Completed		Degre
EDUCATION: Check appropring the School Diploma G.E.D. The Highest Grade or Education Control Names of colleges / universities	Certificate Californial Californial Level Achieved Mas	a High School Proters Degree in Busi	ness Admin	istration Completed		Degre

Course Studied

Pilot training

Yes No

Hours 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
From To 3/2014 3/2017	At-Large Member	Aviation Advisory Committee At-Large Member providing advice and input to
3/2014 3/2017	Employer's Name and Address	airport administration management
Total: <u>Yrs. Mos.</u> 3 Hrs. per week Volunteer	Aviation Advisory Committee Contra Costa County Airports 550 Sally Ride Drive Concord, CA. 94520	and staff, as well as assisting in Aviation Advisory Committee functions
B) Dates (Month, Day, Year)	Title	Duties Performed
<u>From To</u> 12/2015	Owner	Own, manage and operate an aviation services business including:
12.2016	Employer's Name and Address	- Aircraft rental
Total: <u>Yrs. Mos.</u> 1 year 7 months Hrs. per week 40 . Volunteer	Hodge Flight Services, LLC 500 Sally Ride Drive, Suite 518 Concord, CA. 94520	- Aviation business consulting - Pilot training support
riis. per ween Volunteer [
C) Dates (Month, Day, Year)	Title	Duties Performed
From To	Title Information Technology Professional	Duties Performed Information technology systems and networks program management
<u>From</u> <u>To</u> 7/1989 12/2015		Information technology systems and
From To 7/1989 12/2015 Total: Yrs. Mos. 27 years	Information Technology Professional	Information technology systems and
From To 7/1989 12/2015 Total: Yrs. Mos.	Information Technology Professional Employer's Name and Address Kaiser Permanente 1 Kaiser Plaza	Information technology systems and
From To 7/1989 12/2015 Total: Yrs. Mos. 27 years	Information Technology Professional Employer's Name and Address Kaiser Permanente 1 Kaiser Plaza	Information technology systems and
From To 7/1989 12/2015 Total: Yrs. Mos. 27 years Hrs. per week 40 . Volunteer	Employer's Name and Address Kaiser Permanente 1 Kaiser Plaza Oakland, CA.	Information technology systems and networks program management
From To 7/1989 12/2015 Total: Yrs. Mos. 27 years Hrs. per week 40 . Volunteer D) Dates (Month, Day, Year)	Employer's Name and Address Kaiser Permanente 1 Kaiser Plaza Oakland, CA. Title	Information technology systems and networks program management
From To 7/1989 12/2015 Total: Yrs. Mos. 27 years Hrs. per week 40 . Volunteer D) Dates (Month, Day, Year) From To	Employer's Name and Address Kaiser Permanente 1 Kaiser Plaza Oakland, CA.	Information technology systems and networks program management
From To 7/1989 12/2015 Total: Yrs. Mos. 27 years Hrs. per week 40 . Volunteer D) Dates (Month, Day, Year) From To	Employer's Name and Address Kaiser Permanente 1 Kaiser Plaza Oakland, CA. Title	Information technology systems and networks program management

7. How did you learn about this vacancy?
CCC Homepage Walk-In Newspaper Advertisement District Supervisor Other
B. 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 X
If Yes, please identify the nature of the relationship:
9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No YesX
If Yes, please identify the nature of the relationship: Airport business operating agreement
CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and pelief, and are made in good faith. I acknowledge and understand that all information in this application is publically accessible. I this / omissions of material fact may cause forfeiture of my rights to serve sta County.
Date: 8/9/2017

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.

THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA and for Special Districts, Agencies and Authorities Governed by the Board Adopted Resolution no. 2011/55 on 2/08/2011 as follows:

IN THE MATTER OF ADOPTING A POLICY MAKING FAMILY MEMBERS OF THE BOARD OF SUPERVISORS INELIGIBLE FOR APPOINTMENT TO BOARDS, COMMITTEES OR COMMISSIONS FOR WHICH THE BOARD OF SUPERVISORS IS THE APPOINTING AUTHORITY

WHEREAS the Board of Supervisors wishes to avoid the reality or appearance of improper influence or favoritism; NOW, THEREFORE, BE IT RESOLVED THAT the following policy is hereby adopted:

- I. SCOPE: This policy applies to appointments to any seats on boards, committees or commissions for which the Contra Costa County Board of Supervisors is the appointing authority.
- II. POLICY: A person will not be eligible for appointment if he/she is related to a Board of Supervisors' Member in any of the following relationships:
- 1. Mother, father, son, and daughter;
- 2. Brother, sister, grandmother, grandfather, grandson, and granddaughter;
- 3. Great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, and great-granddaughter;
- 4. First cousin;
- 5. Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter;
- 6. Sister-in-law (brother's spouse or spouse's sister), brother-in-law (sister's spouse or spouse's brother), spouse's grandmother, spouse's granddaughter, and spouse's grandson;
- 7. Registered domestic partner, pursuant to California Family Code section 297.
- 8. The relatives, as defined in 5 and 6 above, for a registered domestic partner.
- 9. Any person with whom a Board Member shares a financial interest as defined in the Political Reform Act (Gov't Code §87103, Financial Interest), such as a business partner or business associate.