

Qualifications: The appointee *must* have a basic understanding of the Salinas Valley Groundwater Basin and groundwater in general, an understanding of how to run an organization, and the ability to work collaboratively with other directors coming from diverse constituencies. In addition, the appointee *must* be a rural residential Well owner; or a representative of an industrial processor, a Local Small or State Small Water System (a public water system with less than 15 but more than 1 connection), or of a mutual water company.

of a mutual water company.					
*Supervisorial District in which you reside:					
I own property in District 2 and re	eside in Aptos,CA				
*Full Name:	*Date:				
Robert J. Rodoni	8-11-2022				
Information provided by the applicant is not regarded as confidential except for the addresses and phone numbers of references and the applicant's personal information including home and work addresses, phone numbers and email address. PLEASE NOTE THAT APPOINTEES MAY BE REQUIRED BY STATE LAW AND COUNTY CONFLICT OF INTEREST CODE TO FILE FINANCIAL DISCLOSURE STATEMENTS.					
*Current Occupation: (within the last twelve (12) months)				
Farm Manager for Sunset Farms Inc (Family Owned)					
*Current License: (Professional or Occupational, da status)	te of issue/or expiration including				
None to report					
*Other Certifications					
NI/A					



Currently MCFB board of directors. Curr	rently SVGSA advisory board rural wall owner	representative. Past SCFB board of direct	ctors. North County Land Use Committee for	the North County PI
References (at lea	st two (2) list names	and contact phone	numbers)	
John Bramers Norm Groot Jess Brown Joel Ackerknecht				
nterest purposes):		the last 12 months	s, if married (For Co	nflict of
Adriana Rodoni, H	lousewife			
Please explain you	ır reasons for wishin	g to serve and, in y	our opinion, how yo	ou feel yo
Please explain you an contribute (use	ur reasons for wishin e separate sheet if ne	g to serve and, in y cessary): (A resum	our opinion, how your may be attached.)	ou feel yo
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APPLICANTS APPOINTED BY THE BOARD OF SUPERVISORS WILL BE REQUIRED TO TAKE AND OATH OF OFFICE.

All applications will be kept on file for one year from the date of receipt of the application.

Complete separate Personal information page.



PERSONAL INFORMATION

The following information is provided in confidence, but may be used by the Board of Supervisors when making the appointment, or be used by the Committee/Commission/Board/Task Force following appointment for purposes of communicating with the appointee.

*Full Name:	*Email Address:
Robert Rodoni	
*Home Address:	*Work Address:
*City of Residence *State *Zip Code	*Citv: *State: *Zip Code
*Telephone:	*Telephone (cell):

Date received by COB:	
Date received by GENERAL MANAGER:	
Date reviewed by GENERAL MANAGER:	
Recommended by BOD:Yes No Date:	
Appointed by BOS: _Yes Date: If Not	appointed check here:
Application valid through:	



P. O. Box 1350 Carmel Valley, CA 93924 (831) 471-7518 meyersd@gmail.com

SUBJECT: Certification of SVBGSA Board Alternate Director Eligibility Criteria:

1.	I am a) permanent resident within the Basin, or b) representati jurisdiction, or a business or organization with a presence with following location:	ves of an agency with in the Basin at the
	a. Residential address:	
	b. Business address:	
2.	I am a rural residential Well owner at the following address:	
	OR;	
	I am a representative of the following industrial process, local of system with 1 to 15 connections	or State public water
	Name:	
	OR;	
	I am a representative of the following industrial processor, a Lo Water System (a public water system with less than 15 but mo of a mutual water company	ocal Small or State Small re than 1 connection), or
	Company Name:	
Applica	Let Cols ant's Signature	8-11-2022
, while	anto dignature	Date