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CITY OF FRESNO  
CITY CLERK'S OFFICE



**MAYOR LEE BRAND**

**NOTIFICATION OF APPOINTMENT BY MAYOR  
TO BOARD OR COMMISSION**

**TO:** City Council  
**THROUGH:** Yvonne Spence, City Clerk  
**BY:** Lee Brand, Mayor

**Reappointment**  
 **New Appointment**

**Name of person replaced:**

**Name:** Edward S. Saliba

**Address:** [Redacted]

**Home Phone:** [Redacted]  
**Work Phone:** [Redacted]

**Appointed to:** Fresno Madera Area Agency on Aging Board

**Term:** Through 01/08/2022

*City Council Agenda 12/12/19*

Application Form

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Profile

Which Boards would you like to apply for?

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None Selected. FRESNO - MADERA AGENCY ON AGING GOVERNING BOARD CITY CLERK'S OFFICE

EDWARD S. SALIBA
First Name Last Name

[Redacted Email Address]

[Redacted Home Address]

FRESNO CA 93729
City State Postal Code

What district do you live in? \* 6

None Selected 6

Briefly explain why are you interested in serving on this board or commission?

I HAVE BEEN SERVING CURRENTLY ON THE GOVERNING BOARD; I AM APPLYING FOR RE-APPOINTMENT

Educational background, Schools Attended, Degrees and Certifications

B.A. AND POST-GRADUATE

Do you or an immediate family member have any professional or financial relationship that may present a potential conflict of interest for this board, commission or similar body?

Yes No

Work History

VALLEY ADULT DAY HEALTH CARE CENTER, INC. = ADMINISTRATOR
Employer Job Title

Work Address [Redacted] FRESNO 93706

City, State, Zip Code

Provide 3 Personal and Professional References. Provide name, address, and phone number where they may be reached during the day.

- 1) TIM ORMAN [Redacted]
2) JEAN ROBINSON [Redacted]
3) LINDA DESSCOTEAUX [Redacted]