



# Twain Harte Community Services District

P. O. Box 649 ▪ Twain Harte, CA 95383  
Phone: (209) 586-3172 ▪ Fax: (209) 586-0424

**Directors:** ▪ Bill McManus ▪ Eileen Mannix ▪ Richard Knudson ▪ Gary Sipperley

## BOARD OF DIRECTORS VACANCY

Interested persons are hereby notified that pursuant to Government Code §1780, there is a vacancy on the Twain Harte Community Services District Board of Directors.

Qualified candidates are invited to apply for the position which will be an appointment until the general election in November 2020.

**Qualifications:** *Must be a registered voter living within the Twain Harte CSD boundaries.*

Applications are available at:  
Twain Harte Community Services District  
22912 Vantage Pointe Dr., Twain Harte, CA 95370  
[www.twainhartecsd.com](http://www.twainhartecsd.com)  
209-586-3172

**Application Due Date: May 3, 2019**

The Board will interview candidates at their regular board meeting on May 8, 2019, and the candidate, if selected by a Board majority, will be seated as if they were elected at a regular district election.



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## APPLICATION FOR APPOINTMENT TO A SPECIAL DISTRICT BOARD OF DIRECTORS VACANCY

### Instructions

If you are interested in serving on the Twain Harte Community Services District Board of Directors, please complete this application and return it to the **General Manager**. **Date Due: May 3, 2019**

You will be advised by the District board if your appointment is confirmed. Thank you for your interest.

DISTRICT: **Twain Harte Community Services District** DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

RESIDENCE ADDRESS: \_\_\_\_\_

BUSINESS OR MAILING ADDRESS: \_\_\_\_\_

PHONE (DAYTIME): \_\_\_\_\_ PHONE (EVENING): \_\_\_\_\_

E-MAIL: \_\_\_\_\_

EDUCATION			
Institution	Major	Degree	Year

WORK/VOLUNTEER EXPERIENCE				
Organization	City	Position	From	To

**STATEMENT OF QUALIFICATIONS:**

Please briefly describe your qualifications and why you are interested in serving on the Board of Directors.

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**CERTIFICATION:**

I certify that the information contained in this application is true and correct. I authorize the verification of the information in this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date