

CITY OF SANTA BARBARA  
PARKS AND RECREATION DEPARTMENT

CITY OF SANTA BARBARA

Integrated Pest Management (IPM) Advisory Committee  
Application for Appointment

OCT 23 2013  
PARK & RECREATION  
PARKS DIVISION

Name: Lawrence Saitzman

Home Address/City/Zip Code: [REDACTED]

Business Address/City/Zip Code: \_\_\_\_\_

Home Telephone Number: [REDACTED] Business Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email Address: [REDACTED]

EXPERIENCE/BACKGROUND

Education: M.A.

Present Occupation: Retired

Memberships in Organizations: Pesticide Awareness + ALT. California Ramp Fruit Growers

If appointed as an Advisory Committee member, please share what expertise you will offer the Committee: former ~~SB~~ Organic Editor California Fruit Growers Mag wrote on organic orchard practices, manage orchard sites total of approx 450 trees. Certificate in Permaculture Design Local Hero award 2008 SB Independent. Co-founder SB Organic Garden Club Regular speaker at City College Environmental Studies UC SB on Board of El Pilar which studies May a forest Gardens

Are you familiar with past and/or current issues related to IPM?  Yes  No

Have you served on a City Advisory Committee, Commission or Board in the past?  Yes  No

If so, please identify the Committee and the dates you served: IPM Committee

Would you be representing a particular organization with an interest in this project? \_\_\_\_\_ If yes, please state which organization you represent: Pesticide Awareness

Please indicate what experience you will bring to the Committee.

*Several decades of organic gardening and orchard exp.  
Work w/ Prof Annabel Ford at UCSB who is an  
Expert on the Food Forests of the Maya.*

There will be the following breakdown of Committee participation. Please indicate what representation you offer to the Committee.

- One member representing the Pesticide Awareness and Alternatives Coalition
- One member representing the Environmental Defense Center
- Three from the community at Large

If you have any questions regarding this Committee or the process of application and selection you may contact:

Santos Escobar  
Parks Manager  
805-564-5464

CITY OF SANTA BARBARA  
PARKS AND RECREATION DEPARTMENT

Integrated Pest Management (IPM) Advisory Committee  
Application for Appointment

Name: Kristen LaBonte

Home Address/City/Zip Code: [REDACTED]

Business Address/City/Zip Code: [REDACTED]

Home Telephone Number: [REDACTED] Business Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email Address: [REDACTED]

EXPERIENCE/BACKGROUND

Education: B.A. Geography UCSB 1999 M.L.S. Library Science Southern

Present Occupation: Life & Environmental Sciences Librarian UCSB CT State 2001

Memberships in Organizations: Int. Assoc. of Aquatic & Marine Sci. Libraries & Info. Centers, American Library Assoc., CA Academic & Research Libraries, Assoc. for Info. Science & Tech., Rock the Earth

If appointed as an Advisory Committee member, please share what expertise you will offer the Committee: I have strong research skills and work collaboratively with others to resolve issues. I'm aware of IPM practices and have a desire to help the city to continue to use these practices in a cost-effective manner.

Are you familiar with past and/or current issues related to IPM?  Yes  No

Have you served on a City Advisory Committee, Commission or Board in the past?  Yes  No

If so, please identify the Committee and the dates you served: IPM Advisory Committee July 2006-current

Would you be representing a particular organization with an interest in this project? No If yes, please state which organization you represent: \_\_\_\_\_

Please indicate what experience you will bring to the Committee.

Past service on the committee, professional service for 5 organizations, background in science and strong research skills.

There will be the following breakdown of Committee participation. Please indicate what representation you offer to the Committee.

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- Three from the community at Large

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**CITY OF SANTA BARBARA  
PARKS AND RECREATION DEPARTMENT**

**Application for Appointment to  
IPM Advisory Committee**

*(City employees are not eligible to serve on the Advisory Committee)*

APPOINTMENT                       RE-APPOINTMENT

Name: \_\_\_\_\_ Greg Chittick \_\_\_\_\_

Home Address/City/Zip Code: \_\_\_\_\_ [REDACTED] \_\_\_\_\_

Business Address/City/Zip Code: \_\_\_\_\_ 93105 \_\_\_\_\_

Home Telephone Number: [REDACTED] Business Phone Number: 805.289.3924

Facsimile Number: 805.289.3935 E-mail Address: [REDACTED]

Who will you represent? *(An organization, community at large, etc.)* at large

**EXPERIENCE/BACKGROUND**

Education: BS Mechanical Engineering UCSB, MS Mechanical Engineering, UC Berkeley

Present Occupation/Position Title: Engineer, Marine Research Specialists

Memberships in Organizations: IIAR, Risk Assessment SoCalChapter, ASME

**If appointed as an Advisory Committee member, please share what expertise you will offer the Committee:**

My work as a consulting engineer involves the preparation of numerous CEQA documents related to release of toxic chemical risk assessments, hazardous materials, toxic health risk assessments, air quality analysis, and various other assessments. My expertise in chemical risk assessments combined with my past experiences working with City staff to develop and implement the City IPM program from its inception makes me qualified to continue working on this important committee

Have you served on this committee or any City Committee in the past?  Yes     No

If so, please identify the Committee and the dates you served: Since its inception in 2006

*Greg Chittick*

Signature \_\_\_\_\_

11/18/2013 \_\_\_\_\_  
Date