

Subject: Online Form Submittal: Advisory Group Application Tuesday,
Date: March 3, 2026 9:09:10 PM

Advisory Group Application

Step 1

Application for Appointment to Whatcom County Advisory Groups

Public Statement

THIS IS A PUBLIC DOCUMENT: As a candidate for a public advisory group, the information provided will be available to the County Council, County Executive, and the public. All advisory group members are expected to be fair, impartial, and respectful of the public, County staff, and each other. Failure to abide by these expectations may result in revocation of appointment and removal from the appointive position.

Title	Mr.
First Name	Cesar
Last Name	Luna
Today's Date	3/3/2026
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
Do you live in Whatcom County?	Yes
Do you have a different mailing address?	<i>Field not completed.</i>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Step 2

1. Name of Advisory Justice Project Oversight & Planning Committee

Group

Justice Project
Oversight and Planning
(JPOP) Committee

Criminal legal system user

2. Do you meet the
residency,
employment, and/or
affiliation requirements
of the position for
which you're applying?

Yes

3. Which Council
district do you live in?

District 4

4. Have you ever been
a member of this
Advisory Group

No

5. Do you or your
spouse have a financial
interest in or are you
an employee or officer
of any business or
agency that does
business with
Whatcom County?

No

6. Have you declared
candidacy (as defined
by RCW 42.17A.055)
for a paid elected office
in any jurisdiction
within the county?

No

You may attach a
resume or detailed
summary of
experience,
qualifications, &
interest in response to
the following questions

Field not completed.

7. Please describe your
occupation (or former
occupation if retired),
qualifications,
professional and/or

Barber

community activities,
and education

8. Please describe why
you're interested in
serving on this
Advisory Group.

I was asked and I believe my life experience brings a perspective
that is needed

References (please
include daytime
telephone number):

Field not completed.

Appointment
Requirements

I understand and agree

Signature of applicant:

Cesar Luna

Place Signed /
Submitted

Lynden, wa

(Section Break)
