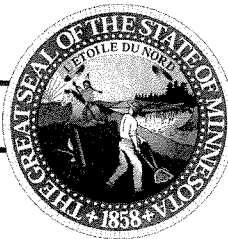


STATE of MINNESOTA

EXECUTIVE



DEPARTMENT

TIM PAWLENTY
GOVERNOR

NOTICE OF APPOINTMENT

BRENDA BROWN

305 Marsh Street
Tyler, Minnesota 56178
County of Lincoln
Congressional District Seven

Because of the special trust and confidence I have in your integrity, judgment and ability, I have appointed and commissioned you to have and to hold the said office of:

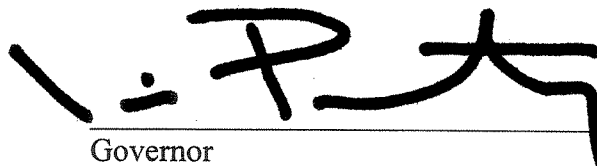
MEMBER REPRESENTING VOLUNTEER FIREFIGHTERS EMERGENCY MEDICAL SERVICES REGULATORY BOARD

Effective: March 9, 2004
Term Expires: January 7, 2008

This appointment carries with it all rights, powers, duties, and emoluments granted by law and pertaining to this position until this appointment is superseded or annulled by me or other lawful authority or by any law of this State.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Minnesota to be affixed at the Capitol in the City of Saint Paul, March 4, 2004.




Governor


Secretary of State

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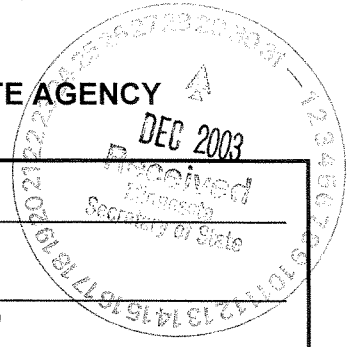
MAR 9 2004

Replacing: Bruce Sherman

President of the Senate

**STATE OF MINNESOTA
OPEN APPOINTMENTS APPLICATION FOR SERVICE ON STATE AGENCY**

All information on this form is available to the public upon request.



Agency Name: * Emergency Medical Regulatory Board
 (Name of board, council, commission or task force to which you are applying.)

Position Sought: Volunteer Firefighter / first responder
 (Membership position sought or enter "member" if no specific requirements exist for position sought.)

Applicant Name: * Brenda Brown
 (First Name) (Last Name)

Applicant Address: * 305 Marsh St Tyler MN 56178
 (Street) (City) (State) (Zip)

Day Phone: * (507) 247-5002 Evening Phone: (507) 247-5002

E-MAIL: * allanbrenda@yahoo.com

County: Lincoln MN House of Rep District: 21A U.S. House of Rep District: 7

* Indicates information that will appear on the Office of the Secretary of State web site: www.sos.state.mn.us

Did the Appointing Authority suggest you submit your application? YES _____ NO X

Any other information the Nominating Person feels would be helpful to the Appointing Authority:
I am a Volunteer Firefighter for the Tyler Fire Department. I am a Emergency Medical Tec. for Tyler Hospital Ambulance Service. I am currently in Paramedic school. I am a BLS Instructor. I also have had Haz Mat training, ACLS, water/ice rescue, BLS among ongoing trainings. I am extremely interested in all aspects of Emergency Medical Services.
 (Statement may continue on reverse or attached sheets)

I swear that, to the best of my knowledge, the above information is correct and that I satisfy all legally prescribed qualifications for the position sought.

Brenda Brown 12-22-03
 (Signature of Applicant)* (Date)

* If another person or group is nominating the applicant, the applicant's signature indicates consent to nomination.

OPTIONAL STATISTICAL INFORMATION

The following information is optional and voluntary. Information is collected for, and compiled in, the annual report on the open appointments process pursuant to *Minnesota Statutes* §15.0597.

Sex: Female Male Political Party: Democratic-Farmer-Labor Green Independence Republican No party preference

Disability: Yes No Race*: African American / Black American Indian / Alaska Native Asian Hispanic Native Hawaiian / Pacific Islander White Other Race _____

National Origin: _____ (* Select as many as apply)
 (Country of Origin or Principle Tribe)

MAIL, FAX, OR SUBMIT APPLICATION IN PERSON, TO: Office of the Secretary of State, Open Appointments
 180 State Office Building
 100 Rev. Dr. Martin Luther King, Jr., Blvd
 St. Paul, MN 55155-1299

FAX: (651) 296-9073
Phone: (651) 297-5845
Email: open.appointments@state.mn.us



Applicants will not receive an acknowledgement of submitted applications; the appointing authority will notify you if an interview is desired. *By request, this application will be made available in alternative format (for example, braille, large print, audio tape, or computer disk.)*

FOR OFFICE USE: Sub by AA: _____ AA: governor Trans Date: 12-31-03
ccj EmsRB

President of the Senate

Public Official Information

Emergency Medical Services Regulatory Board

Name: Brown, Brenda
 Occupation: Emergency Medical Tech
 Business Address: Tyler, MN 56178
 Employer Name: Tyler Ambulance
 Appointment Date: 03/09/04

Sources of Compensation

None Reported

Securities

None Reported

Real Property

None Reported

Pari-Mutuel Horse Racing Interests

None Reported

LINKS	
<u>Current Agency</u>	<u>Agency Index</u>
<u>Current Public Official</u>	<u>Public Official Index</u>
<u>Campaign Finance Home Page</u>	

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DEC 13 2004

President of the Senate