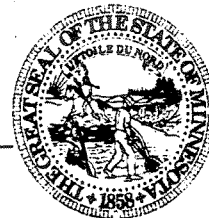


Minnesota

Campaign Finance and Public Disclosure Board



Suite 190, Centennial Building, 658 Cedar Street, St. Paul, MN 55155-1603
Email: cfboard@state.mn.us

Notice of Appointment of Public Official

under Minn. Stat. §§ 10A.01, subd. 35, and 10.09

Instructions

- This form must be completed by the appointing authority.
- This statement may be mailed or faxed to the Board office. Facsimile number: 651/296-1722 or 800/357-4114.
- All information on this statement is public information and will be published on the Board's website: www.cf.board@state.mn.us
- It is unlawful to use this information for commercial purposes.
- Address questions to Board staff at 651/296-5615 or 800/657-3889.
- Board staff may also be reached by e-mail at: cf.board@state.mn.us.

Appointment Information

Name of agency, board, commission		Minnesota Gambling Control Board	
Appointed position		Board Member	
Date of appointment	9/11/07	Term of office	9/11/07 to 6/30/11
Replacing (Name of individual who formerly held this position)		Richard B. Solum	

Appointee Information

Name of appointee		William A. Gillespie	
Address		172 E. 6th St. #2405	
City, state, zip	St. Paul, MN 55101	Telephone (daytime)	(651) 291-1119

Certification

I, Lori Swanson, Attorney General, certify that the information contained on this form is complete, true, and correct.
(print or type name)

Lori Swanson
Signature of appointing authority

Date

Any person who signs and certifies to be true a report or statement which the person knows contains false information, or who knowingly omits required information, is guilty of a gross misdemeanor and is subject to a civil penalty of up to \$3,000.

This document is available in alternative formats to individuals with disabilities by calling 651/296-5148; 800/657-3889; or through the Minnesota Relay Service at 800/627-3529.

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: * MINNESOTA GAMBLING Control Board
(Name of board, council, commission or task force to which you are applying.)

Position Sought: BOARD member
(Membership position sought or enter "member" if no specific requirements exist for position sought.)

Applicant Name: * William A. Gillespie
(First Name) (Last Name)

Preferred Mailing Address: * 172 E. 6th ST. #2405 ST. PAUL MN 55101
(Street) (City) (State) (Zip)

Work Phone: * (651) 291-1119 Home Phone: (651) 492-9705

E-MAIL: * bgillespie@Mppaa.com

County: Ramsey MN House of Rep District: 65B U.S. House of Rep District: A
* Indicates information that will appear on the Office of the Secretary of State web site: www.sos.state.mn.us

Have you ever been convicted of a felony: Yes No

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

Please attach a current resume or a biographical statement containing work history, education, community activities, etc., and any other information the Applicant or Nominating Person feels would be helpful to the Appointing Authority.

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
 Independence
 Republican
 Other
 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: USA (* Select as many as apply)
(Country of Origin or Principle Tribe)

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.

William A. Gillespie 8-21-07
(Signature of Applicant) (Date)

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

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: _____ Trans Date: _____