



**SANTA MARIA PUBLIC AIRPORT DISTRICT  
BOARD OF DIRECTORS**

**Thursday  
March 12, 2020**

**Administration Building  
Airport Boardroom  
7:00 P.M.**

**REGULAR MEETING  
A G E N D A**

*This agenda is prepared and posted pursuant to the requirements of the California Government Code Section 54954.2. By listing a topic on this agenda, the Santa Maria Public Airport District has expressed its intent to discuss and act on each item. The Santa Maria Public Airport District welcomes orderly participation at its meetings from all members of the public. This includes assistance under the Americans with Disabilities Act to provide an equally effective opportunity for individuals with a disability to participate in and benefit from District activities. To request assistance with disability accommodation, please call (805) 922-1726. Notification at least 48 hours prior to the meeting would enable the Santa Maria Public Airport District to make reasonable arrangements to ensure accessibility to this meeting.*

**CALL TO ORDER**

**PLEDGE OF ALLEGIANCE**

**ROLL CALL: Adams, Brown, Rafferty, Engel, Baskett**

- 1. MINUTES OF THE REGULAR MEETING HELD FEBRUARY 27, 2020.**
- 2. COMMITTEE REPORT(S):**
  - a) AVIATION SUPPORT & PLANNING (Standing or Ad Hoc)**
  - b) ADMINISTRATION & FINANCIAL (Standing or Ad Hoc)**
  - c) MARKETING & PROMOTIONS (Standing or Ad Hoc)**
  - d) CITY & COUNTY LIAISON**
  - e) STATE & FEDERAL LIAISON**
  - f) VANDENBERG LIAISON**
  - g) BUSINESS PARK COMMITTEE (Ad Hoc)**
- 3. GENERAL MANAGER'S REPORT**
- 4. MANAGER OF FINANCE & ADMINISTRATION REPORT**
  - a) Demand Register**
- 5. DISTRICT COUNSEL'S REPORT. (Joshua George and Natalie Frye Laacke)**

6. **PUBLIC SESSION:** Statements from the floor will be heard during public session. Request to Speak forms are provided for those wishing to address the board. After completing the form, please give it to the Clerk. Requests requiring board action will be referred to staff and brought on the next appropriate agenda. Members of the public are cordially invited to speak on agenda items as they occur. Staff reports covering agenda items are available for review in the offices of the General Manager on the Tuesday prior to each meeting. The Board will establish time limit for receipt of testimony. The board reserves the right to establish further time limits for receipt of testimony.
7. **DISCUSSION AND DIRECTION TO STAFF REGARDING OFFERING LEASE FOR HANGAR 3001-F AIRPARK DRIVE TO COMPOSITE PLASTIC SYSTEMS.**
8. **AUTHORIZATION FOR THE PRESIDENT AND SECRETARY TO CONSENT TO THE TRANSFER OF THE HANGAR LOCATED AT 2997-B AIRPARK DRIVE TO RICHARD SHAPLEY AND R & A ROWAN TRUST.**
9. **CLOSED SESSION.** The Board will hold a Closed Session to discuss the following item(s):
  - a) **Conference with Real Property Negotiators (Chris Hastert, Tom Ross and District Counsel) Re: APN 111-231-11 (Gov. Code Section 54956.8)**
  - b) **Conference with Legal Counsel-Anticipated Litigation. Significant exposure to litigation pursuant to Government Code Section 54956.9(b): (One Case).**
10. **DIRECTORS' COMMENTS.**
11. **ADJOURNMENT.**

MINUTES OF THE REGULAR BOARD  
MEETING OF THE BOARD OF DIRECTORS  
OF THE SANTA MARIA PUBLIC AIRPORT  
DISTRICT HELD FEBRUARY 27, 2020

The Board of Directors of the Santa Maria Public Airport District held a Regular Meeting at the regular place at 7:00 p.m. Present were Directors Adams, Brown, Rafferty, Engel and Baskett. General Manager Hastert, Manager of Finance & Administration Reade and District Counsel George.

1. MINUTES OF THE REGULAR MEETING HELD February 13, 2020. Director Rafferty made a Motion to approve the minutes of the regular meeting held February 13, 2020. Director Baskett Seconded and it was carried by a 5-0 vote.
2. COMMITTEE REPORT(S):
  - a) AVIATION SUPPORT & PLANNING (Standing or Ad Hoc) – No meeting scheduled.
  - b) ADMINISTRATION & FINANCIAL (Standing or Ad Hoc) – No meeting scheduled.
  - c) MARKETING & PROMOTIONS (Standing or Ad Hoc) – No meeting scheduled.
  - d) CITY & COUNTY LIAISON – No meeting scheduled.
  - e) STATE & FEDERAL LIAISON – No meeting scheduled.
  - f) VANDENBERG LIAISON – No meeting scheduled.
  - g) BUSINESS PARK COMMITTEE (Ad Hoc) – The committee will meet February 28th.
3. GENERAL MANAGER'S REPORT. Mr. Hastert updated the board on the noise complaints from the ATAC aircraft. He discussed his meetings with our engineers, United Airlines, an upcoming tourism retreat and California Aviation Day which he was unable to attend. He briefed the Board on the latest fare study for our upcoming air service.
4. MANAGER OF FINANCE & ADMINISTRATION REPORT.

The Manager of Finance & Administration presented the Demand Register to the Board for review and approval.

  - a) Demand Register. The Demand Register, covering warrants 067646 through 067685 in the amount of \$85,433.66 was recommended for approval as presented. Director Baskett made a Motion to accept the Demand Register as presented. Director Rafferty Seconded and it was carried by a 5-0 vote.
  - b) Budget to Actual. Received and filed.
  - c) Financial Statements. Received and filed.
5. DISTRICT COUNSEL'S REPORT. Nothing to report.

6. PUBLIC SESSION: Statements from the floor will be heard during public session. Request to Speak forms are provided for those wishing to address the board. After completing the form, please give it to the Clerk. Requests requiring board action will be referred to staff and brought on the next appropriate agenda. Members of the public are cordially invited to speak on agenda items as they occur. Staff reports covering agenda items are available for review in the offices of the General Manager on the Tuesday prior to each meeting. The Board has established a five-minute time limit for receipt of testimony. The board reserves the right to establish further time limits for receipt of testimony.

No one requested to speak.

7. The Consent Calendar is approved by ROLL CALL VOTE on one Motion. These items are read only on request of Board members.

The following items are presented for Board approval without discussion as a single agenda item in order to expedite the meeting. SHOULD ANYONE WISH TO DISCUSS OR DISAPPROVE ANY ITEM, it must be dropped from the blanket Motion of approval and be considered as a separate item.

It is the recommendation of staff that the Board receives, and file and/or approve the following leases and agreements or other routine items and authorize the President and Secretary to execute them:

- a) Authorization for the General Manager to execute a contract and proceed with PFAS testing as recommended by SCS Engineers in conjunction with the SWRCB approved work plan.
- b) Authorization for the President and Secretary to execute the Eleventh Amendment of Agreement between the District and Raul Michel.
- c) Authorization for the President and Secretary to execute the Nineteenth Amendment of Agreement between the District and CJJ Farming.
- d) Authorization for the President and Secretary to execute the Third Amendment of Agreement between the District and Gresser, Inc.

Director Rafferty made a Motion to approve Consent Calendar Items 7(a) through 7(d) as presented. Director Brown Seconded and it was carried by a 5-0 vote. Directors Adams, Brown, Rafferty, Engel and Baskett voted "Yes".

8. Presentation by Nav Mosey of Airspace Systems, Inc. regarding Drone Detection Systems.
9. Discussion and direction to staff regarding terminal parking lot operation and monitoring. Discussion was held and direction was given to staff.
10. Nomination for Independent Special District Representative to Santa Barbara Local Agency Formation Commission. Director Rafferty made a Motion to nominate Craig Geyer. Director Brown Seconded and it was carried by a 5-0 vote.

11. Discussion and direction to staff regarding membership and General Manager participation on the Board for the Economic Alliance Foundation of Northern Santa Barbara County. Discussion was held and direction was given to Mr. Hastert.

RECESS: At 8:03 p.m.

Return to OPEN SESSION: At 8:12 p.m. The Board and staff reconvened to Open Session.

12. CLOSED SESSION. At 8:12 p.m. the Board went into Closed Session to discuss the following item(s):

- a) Conference with Real Property Negotiators (Chris Hastert, Tom Ross and District Counsel) Re: APN 111-231-11 (Gov. Code Section 54956.8)
- b) Conference with Legal Counsel-Pending litigation pursuant to Government Code Section 54956.9(d)(4): 1 case SMPAD v. David Baskett.

At 8:55 p.m., the Board and staff reconvened to Open Public Session.

There were no reportable actions.

13. DIRECTORS' COMMENTS: Directors Rafferty, Brown and Baskett had no comment.

Director Engel wanted Air Service Development staff to mention the impact of Raiders fans to Allegiant.

Director Adams appreciated the Drone presentation.

14. ADJOURNMENT. President Adams asked for a Motion to adjourn to a Regular Meeting to be held on March 12, 2020 at 7:00 p.m. at the regular meeting place. Director Rafferty made that Motion, Director Engel Seconded and the Motion was carried by a 5-0 vote.

#### ORDER OF ADJOURNMENT

This Regular Meeting of the Board of Directors of the Santa Maria Public Airport District is hereby adjourned at 8:56 p.m. on February 27, 2020.

\_\_\_\_\_  
Chuck Adams, President

\_\_\_\_\_  
Hugh Rafferty, Secretary

**2019-2020**

**DEMAND REGISTER  
SANTA MARIA PUBLIC AIRPORT DISTRICT**

Full consideration has been received by the Santa Maria Public Airport District for each demand, numbers 067686 to 067736, and electronic payments on Pacific Premier Bank and in the total amount of \$149,469.32.

\_\_\_\_\_  
CHRIS HASTERT  
GENERAL MANAGER

\_\_\_\_\_  
DATE

The undersigned certifies that the attached register of audited demands of the Santa Maria Public Airport District for each demand, numbers 067686 to 067736, and electronic payments on Pacific Premier Bank in the total amount of \$149,469.32 has been approved as being in conformity with the budget approved by the Santa Maria Public Airport District and funds are available for their payment.

\_\_\_\_\_  
VERONEKA READE  
MANAGER OF FINANCE AND ADMINISTRATION

\_\_\_\_\_  
DATE

THE BOARD OF DIRECTORS OF THE SANTA MARIA PUBLIC AIRPORT DISTRICT APPROVED PAYMENT OF THE ATTACHED WARRANTS AT THE MEETING OF MARCH 12, 2020.

\_\_\_\_\_  
HUGH RAFFERTY  
SECRETARY

## Santa Maria Public Airport District

### Demand Register

Check Number	Check Date	Vendor Name	Check Amount	Description
067686	3/10/2020	Chuck Adams	600.00	Directors Fees
067687	3/10/2020	Adamski Moroski	4,301.50	Legal Service
067688	3/10/2020	ADB SAFEGATE Americas LLC	913.47	Lighting & Nav Aid Maint.
067689	3/10/2020	Airflow Filter Service, Inc.	85.00	Building Maint. - Terminal
067690	3/10/2020	AT&T	41.04	Phone Service
067691	3/10/2020	Berchtold Equipment Company	1,996.03	Heavy Equip Maint - Mechanical
067692	3/10/2020	Bomar Security & Investigation	5,383.04	Security Service
067693	3/10/2020	Brayton's Power Wash & Sweep	950.00	Street Sweeping
067694	3/10/2020	Consolidated Electrical Distributors, Inc.	1,655.53	Lighting Maintenance
067695	3/10/2020	Coast Networx	210.00	Computer Support
067696	3/10/2020	City of Santa Maria	400.52	Water Invoice
067697	3/10/2020	City of Santa Maria-Util Div	3,021.09	Water Invoices
067698	3/10/2020	Clark Pest Control	990.00	Pest Control - Terminal & Adm.
067699	3/10/2020	Carl Engel, Jr.	400.00	Directors Fees
067700	3/10/2020	Fastenal Company	120.81	Shop Supplies
067701	3/10/2020	Kerry Fenton	1,136.22	Travel Expense
067702	3/10/2020	Frontier Communications	120.83	Telephone Service
067703	3/10/2020	The Garland Company, Inc	399.21	Building Maint. - Hangar
067704	3/10/2020	The Gas Company	1,024.20	Utilities
067705	3/10/2020	Grainger	31.45	Misc. Office Supplies
067706	3/10/2020	Hayward Lumber Company	355.20	MHP - Maintenance
067707	3/10/2020	Interstate Batteries	160.90	Auto Maint. - Mechanical
067708	3/10/2020	Ray Heath	3,575.20	Consulting Service
067709	3/10/2020	J B Dewar, Inc	471.11	Fuel Expense - Gas/Diesel
067710	3/10/2020	J C Beasley Enterprises	288.75	Fencing and Gates
067711	3/10/2020	Lowe's	108.54	Building Maint. - Terminal
067712	3/10/2020	Mission Uniform Service	292.00	Uniform Service
067713	3/10/2020	Mr. Backflow	1,634.00	Maint. - Backflow Valve

067714	3/10/2020 Napa Auto Parts	74.56	Auto parts
067715	3/10/2020 Quinn Company	88.70	Equipment Rental
067716	3/10/2020 Hugh Rafferty	200.00	Directors Fees
067717	3/10/2020 Hugh Rafferty - Reimbursement	87.75	Expense Reimbursement
067718	3/10/2020 Veroneka Reade	208.16	Medical Reimbursement
067719	3/10/2020 ReadyRefresh by Nestle	168.81	Water Delivery
067720	3/10/2020 Safeguard Business Systems	328.01	Check Order
067721	3/10/2020 Safety-Kleen	942.08	Solvent
067722	3/10/2020 Sage Institute Inc.	1,495.00	Consulting Service
067723	3/10/2020 San Luis Powerhouse	525.00	Generator Maintenance
067724	3/10/2020 Santa Barbara Cnty Special District Assoc.	80.00	Monthly Chapter Dinner
067725	3/10/2020 County of Santa Barbara EHS/ CUPA	1,288.00	Hazardous Materials Permit
067726	3/10/2020 Service Star	11,159.91	Janitorial Service
067727	3/10/2020 S Lombardi & Assoc., Inc.	20,760.00	Airport Advertising
067728	3/10/2020 Radisson Hotel-Santa Maria	248.64	Hotel Room Consultant
067729	3/10/2020 South Coast Emergency Vehicle Services	1,436.33	Business Travel and Entertainment
067730	3/10/2020 Tartaglia Engineering	24,634.00	AIP 35
067731	3/10/2020 Toshiba Financial Services	501.43	Copier Lease
067732	3/10/2020 Total Compensation Systems, Inc.	1,350.00	Consulting Services
067733	3/10/2020 Ultrex Business Solutions	8.52	Office Supplies
067734	3/10/2020 Verizon Wireless	901.77	Cell Phones
067735	3/10/2020 VTC Enterprises	70.00	Trash - Paper Recycling
067736	3/10/2020 Ward Diesel Filter Systems	555.00	Diesel Exhaust Remova I- ARFF
	Subtotal	<u>97,777.31</u>	
	2/27/2020 CalPERS	125.67	CalPERS Retirement
	2/27/2020 Card ServiceCenter	8,168.29	Business Travel & Enter.
	2/27/2020 Card ServiceCenter	1,371.96	Business Travel & Enter.
	2/27/2020 Card ServiceCenter	876.04	Business Travel & Enter.
	3/2/2020 Card ServiceCenter	1,161.25	Business Travel & Enter.
	2/27/2020 Card ServiceCenter	1,009.44	Business Travel & Enter.
	3/3/2020 CalPERS	4,945.59	CalPERS Retirement
	3/5/2020 Paychex	25,045.20	Payroll
	3/6/2020 Mass Mutual	3,828.96	Employee Paid Retirement



3/6/2020 Paychex

5,159.61 Payroll Taxes

Subtotal

51,692.01

Total

149,469.32

# LIST OF DISTRICT HANGARS

## T-HANGARS

Address	W	D	H	Sq. Ft.	Mo. Rent
<input type="checkbox"/> 3005 Airpark Drive	42'1"	34'0"	12'8"	1,078	\$230
<input type="checkbox"/> 3009 Airpark Drive	41'5"	33'0"	12'9"	1,040	\$222
<input type="checkbox"/> 3011 Airpark Drive	41'8"	32'1"	12'6"	1,000	\$214
<input type="checkbox"/> 3019 Airpark Drive	41'8"	32'1"	12'6"	1,000	\$214
<input type="checkbox"/> 3023 Airpark Drive	41'5"	33'0"	12'9"	1,040	\$222
<input type="checkbox"/> 3027 Airpark Drive	42'0"	32'8"	12'7"	1,026	\$219
<input type="checkbox"/> 3031 Airpark Drive	42'0"	32'8"	12'7"	1,026	\$219
<input type="checkbox"/> 3039 Airpark Drive	41'8"	32'0"	12'8"	994	\$212
<input type="checkbox"/> 3103 Airpark Drive	41'8"	34'0"	14'3"	1,043	\$223
<input type="checkbox"/> 3107 Airpark Drive	39'1"	30'4"	11'0"	870	\$186
<input type="checkbox"/> 3109 Airpark Drive	39'6"	31'9"	11'0"	940	\$201
<input type="checkbox"/> 3111 Airpark Drive	40'8"	32'10"	12'0"	963	\$206

## CORPORATE T-HANGARS

<input type="checkbox"/> 3035 Airpark Drive (Unit A)	54'8"	45'11"	16'1"	1,982	\$424
<input type="checkbox"/> 3035 Airpark Drive	53'8"	45'11"	16'1"	1,839	\$393

## CORPORATE HANGARS

<input checked="" type="checkbox"/> 3001 Airpark Drive (Units A, D, H)	52'0"	40'9"	14'0"	2,119	\$453
<input checked="" type="checkbox"/> 3001 Airpark Drive (Units B, G)	50'8"	40'9"	14'0"	2,064	\$441
<input checked="" type="checkbox"/> 3001 Airpark Drive (Units C, F)	49'10"	40'9"	14'0"	2,027	\$433
<input checked="" type="checkbox"/> 3001 Airpark Drive (Unit E)	51'10"	40'9"	14'0"	2,109	\$451
<input checked="" type="checkbox"/> 3029 Airpark Drive (Units A, F)	61'8"	50'3"	16'0"	3,098	\$662
<input checked="" type="checkbox"/> 3029 Airpark Drive (Units B-E)	60'6"	50'3"	16'0"	3,040	\$650
<input checked="" type="checkbox"/> 3043 Airpark Drive (Units A-G)	60'6"	50'3"	16'0"	3,040	\$650
<input checked="" type="checkbox"/> 3105 Airpark Drive (Units A-G)	60'6"	51'6"	16'2"	3,115	\$666

\*REQUIRES  
4/5 BOARD  
APPROVAL

COMPOSITE PLASTIC SYSTEM

5-8-18

Name ZAC FARGHER

Date

Address 237 TOWN CENTER WEST 140, SANTA MARIA, CA 93454

(805) 854-1391

OFFICE@CP-SYS.NET

I agree to provide a copy of my aircraft registration within 30 days of Lease commencement.

I acknowledge receipt of the Santa Maria Public Airport District's Hangar Lease Policy.

I authorize the Santa Maria Public Airport District to prepare the necessary Hangar Space Lease when a hangar, which I have selected, becomes available.

COMPOSITE PLASTIC SYSTEMS  
Name

5-8-18  
Date

  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

FQ69474

**FILED**

In the office of the Secretary of State  
of the State of California

**AUG-29 2017**

**1. CORPORATE NAME**

COMPOSITE PLASTIC SYSTEMS

**2. CALIFORNIA CORPORATE NUMBER**

C3620622

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

**3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.**

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to **Item 17**.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
237 TOWN CENTER WEST, #140, SANTA MARIA, CA 93458			
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
237 TOWN CENTER WEST, #140, SANTA MARIA, CA 93458			
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE
ERIN TURNER 237 TOWN CENTER WEST, #140, SANTA MARIA, CA 93458			

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ RIENK AYERS	ADDRESS 237 TOWN CENTER WEST, #140, SANTA MARIA, CA 93458	CITY	STATE	ZIP CODE
8. SECRETARY LAURA AYERS	ADDRESS 237 TOWN CENTER WEST, #140, SANTA MARIA, CA 93458	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/ RIENK AYERS	ADDRESS 237 TOWN CENTER WEST, #140, SANTA MARIA, CA 93458	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME RIENK AYERS	ADDRESS 237 TOWN CENTER WEST, #140, SANTA MARIA, CA 93458	CITY	STATE	ZIP CODE
11. NAME LAURA AYERS	ADDRESS 237 TOWN CENTER WEST, #140, SANTA MARIA, CA 93458	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY: 0

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS ERIN TURNER				
15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE	
1701 N RIVER ROCK ROAD, SANTA MARIA, CA 93454				

**Type of Business**

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
MANUFACTURER

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

08/29/2017 ERIN TURNER BOOKKEEPER  
 DATE TYPE/PRINT NAME OF PERSON COMPLETING FORM TITLE SIGNATURE

**From:** [ROBERT ROWAN](#)  
**To:** [Kerry Fenton](#)  
**Subject:** Re: Lease  
**Date:** Thursday, February 27, 2020 4:04:15 PM

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My husband and I own with Dick Shapley hanger 2997A. The lease is in Richard Shapley and Robert Rowan name. In December 1916 we added it to our trust, R & A Rowan Trust, and recorded it with the Santa Barbara County. At that time, you insisted on keeping the lease in Rischard Shapley and Robert Rowan when we informed you it had been put in a trust. (Shapleys also have their half in a trust). Robert Rowan died on 7/8/19. I want to change the lease so reflects either my name, Arlene Rowan or R & A Rowan Trust. I will then change the registration on the plane to reflect the change.

-----Original Message-----

From: Kerry Fenton <kfenton@santamariaairport.com>  
To: rowanag@aol.com <rowanag@aol.com>  
Sent: Thu, Feb 27, 2020 1:47 pm  
Subject: Lease

Hi Mrs. Rowan,

I spoke with our General Manager and he said this will have to be brought to our attorney for a definitive answer but for now if you could provide in writing what exactly you are looking to get approved and if you have the death certificate that would be great as well. Once we have your request in writing we will send to our attorney and go from there. Do you have any paperwork from the denial of this request? We don't have anything in your file for this.

Please let me know if you have any questions.

Thank you,

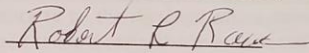
Kerry Fenton  
Administrative Assistant  
Santa Maria Public Airport District  
3217 Terminal Drive  
Santa Maria, CA 93455  
(805) 922-1726 x14 / Fax: (805) 922-0677  
[www.santamariaairport.com](http://www.santamariaairport.com)

"You've got to be very careful if you don't know where you are going, because you might not get there."-Yogi Berra

**ASSIGNMENT OF AIRPORT HANGER LEASE**

For no consideration, I, Robert Lee Rowan, assign to Robert L. Rowan and Arlene C. Rowan, Trustees of the Revocable Living R & A Rowan Trust dated March 10, 1994, Amended and Restated March 15, 2011 (the "Trust"), all of my interest in that certain Lease and Agreement by and between the Santa Maria Public Airport District and Richard O. Shapley and Robert L. Rowan signed on March 1, 2004. This Assignment shall be effective as of the date of this instrument. Hereafter, the Trust shall have all the rights given under the Lease.

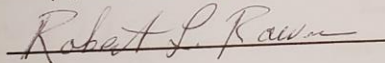
Executed at San Luis Obispo, California, on 12-6-, 2016.



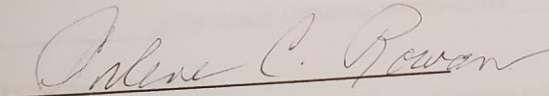
Robert L. Rowan

**ACCEPTANCE OF ASSIGNMENT**

The undersigned, as of the effective date of the foregoing Assignment, hereby accept said assignment of Robert L. Rowan's interest in the Lease and Agreement and hereby accept, adopt and agree to all terms and conditions of said Lease.



Robert L. Rowan, Trustee of the R & A ROWAN TRUST under Agreement dated March 10, 1994, Amended and Restated March 15, 2011.



Arlene C. Rowan, Trustee of the R & A ROWAN TRUST under Agreement dated March 10, 1994, Amended and Restated March 15, 2011



**CALIFORNIA ALL-PURPOSE  
CERTIFICATE OF ACKNOWLEDGMENT  
(CALIFORNIA CIVIL CODE § 1189)**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA )  
COUNTY OF SANTA BARBARA )

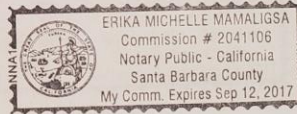
On DECEMBER 11, 2016 before me, ERIKA MICHELLE MAMALIGSA, Notary  
(Date) (Here Insert Name and Title of the Officer)

personally appeared ROBERT LEE ROWAN  
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Erika Michelle Mamaligsa  
Signature of Notary Public



(Notary Seal)

**ADDITIONAL OPTIONAL INFORMATION**

**Description of Attached Document**

Title or Type of Document: ASSIGNMENT OF AGREEMENT Document Date: \_\_\_\_\_  
HANGER LEASE

Number of Pages: 2 Signer(s) Other Than Named Above: \_\_\_\_\_

Additional Information: ATTACHED TO CERTIFICATE DOC.



**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF SAN LUIS OBISPO**  
 SAN LUIS OBISPO, CALIFORNIA

3052019139922

**CERTIFICATE OF DEATH**

3201940001238

1. NAME OF DECEDENT - FIRST GIVEN <b>ROBERT</b>		2. MIDDLE <b>LEE</b>		3. LAST (Family) <b>ROWAN</b>		LOCAL REGISTRATION NUMBER	
4. BIRTH STATE/COUNTRY <b>IL</b>		10. SOCIAL SECURITY NUMBER <b>352-24-4538</b>		11. EVER IN U.S. ARMED FORCES <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		12. MARITAL STATUS (at time of death) <b>MARRIED</b>	
13. EDUCATION - Highest Level Degree <b>BACHELOR</b>		14. WAS DECEDENT HISPANIC/LATINO/SPANISH? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE (List 10.3 races may be listed under subcategory of race) <b>CAUCASIAN</b>		7. DATE OF DEATH (month/day/year) <b>07/07/2019</b>	
17. USUAL OCCUPATION - Type of work for most of the year. DO NOT USE RETIRED <b>PILOT</b>		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, retail construction, employment agency, etc.) <b>COMMERCIAL AVIATION</b>		19. YEARS IN OCCUPATION <b>40</b>		8. HOUR (24 Hours) <b>2218</b>	
20. DECEDENT'S RESIDENCE (Street and number, or P.O. box) <b>226 SOUTH ALPINE STREET</b>		27. COUNTY/ZIP CODE <b>SAN LUIS OBISPO 93420</b>		24. YEARS IN COUNTY <b>45</b>		25. STATE/FOREIGN COUNTRY <b>CA</b>	
26. INFORMANT'S NAME, RELATIONSHIP <b>ARLENE ROWAN, SPOUSE</b>		28. DEPARTMENT AND ADDRESS OF REGISTRAR <b>226 SOUTH ALPINE STREET, ARROYO GRANDE, CA 93420</b>		29. ZIP CODE <b>93420</b>		30. YEARS IN COUNTY <b>45</b>	
29. NAME OF SURVIVING SPOUSE (SPOUSE-FIRST) <b>ARLENE</b>		29. MIDDLE <b>CHRISTINE</b>		30. LAST (BIRTH NAME) <b>PAULY</b>		31. BIRTH STATE <b>IL</b>	
31. NAME OF FATHER (FATHER-FIRST) <b>LORENZO</b>		30. MIDDLE <b>LEE</b>		31. LAST (BIRTH NAME) <b>ROWAN</b>		32. BIRTH STATE <b>IL</b>	
32. NAME OF MOTHER (MOTHER-FIRST) <b>HELEN</b>		30. MIDDLE <b>LEE</b>		31. LAST (BIRTH NAME) <b>KOTECKI</b>		32. BIRTH STATE <b>WI</b>	
33. DISPOSITION DATE (month/year) <b>07/10/2019</b>		40. PLACE OF FINAL DISPOSITION <b>RESIDENCE OF ARLENE ROWAN 226 SOUTH ALPINE STREET, ARROYO GRANDE, CA 93420</b>		41. TYPE OF DISPOSITIONS <b>CR/RES</b>		42. SIGNATURE OF EMBALMER <b>NOT EMBALMED</b>	
43. NUMBER OF FUNERAL HOME/BURIAL <b>NEPTUNE SOCIETY</b>		44. LICENSE NUMBER <b>FD1309</b>		45. SIGNATURE OF LOCAL REGISTRAR <b>PENNY BORENSTEIN, MD</b>		46. LICENSE NUMBER <b>NOT EMBALMED</b>	
47. DATE (month/year) <b>07/10/2019</b>		102. PLACE OF DEATH <b>FRENCH HOSPITAL MEDICAL CENTER</b>		103. IF HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> INPATIENT <input type="checkbox"/> OUTPATIENT <input type="checkbox"/> OTHER		104. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> HOME <input type="checkbox"/> HOME/LLC <input type="checkbox"/> HOME/OTHER	
104. COUNTY <b>SAN LUIS OBISPO</b>		106. FACILITY ADDRESS OR LOCATION (WHERE FOUND) (Street and number, or location) <b>1911 JOHNSON AVE</b>		107. CAUSE OF DEATH <b>W ASPIRATION PNEUMONIA</b>		108. COUNTY <b>SAN LUIS OBISPO</b>	
107. CAUSE OF DEATH <b>W ASPIRATION PNEUMONIA</b>		108. COUNTY <b>SAN LUIS OBISPO</b>		109. WEEKS <b>WEEKS</b>		110. BIRTHS PERFORMED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
110. BIRTHS PERFORMED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		111. AUTOPSY PERFORMED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		112. AUTOPSY PERFORMED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		113. UNDER 18 (month/year) <b>NO</b>	
113. UNDER 18 (month/year) <b>NO</b>		114. LICENSEE (FIRST TO THE BEST OF HIS KNOWLEDGE) OCCURRED AT THE HOUR, DATE, AND PLACE LISTED FROM THE CAUSE(S) LISTED <b>07/07/2019 07:07/2019 1023 NIPOMO ST STE 110, SAN LUIS OBISPO, CA 93401</b>		115. SIGNATURE AND TITLE OF CERTIFIER <b>MICHAEL BRIAN HAJDUK M.D.</b>		116. LICENSE NUMBER <b>A84931</b>	
116. LICENSE NUMBER <b>A84931</b>		117. DATE (month/year) <b>07/09/2019</b>		118. TYPE OF DEATH (PHYSICIAN'S NAME, ADDRESS, ADDRESS OF CODE) <b>MICHAEL BRIAN HAJDUK M.D.</b>		119. PLACE OF BIRTH <b>IL</b>	
119. PLACE OF BIRTH <b>IL</b>		120. RACE <b>CAUCASIAN</b>		121. INJURY DATE (month/year) <b>07/07/2019</b>		122. HOUR (24 Hours) <b>2218</b>	
121. INJURY DATE (month/year) <b>07/07/2019</b>		122. HOUR (24 Hours) <b>2218</b>		123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.) <b>NO</b>		124. DESCRIBE HOW INJURY OCCURRED (e.g., vehicle which resulted in injury) <b>NO</b>	
124. DESCRIBE HOW INJURY OCCURRED (e.g., vehicle which resulted in injury) <b>NO</b>		125. LOCATION OF INJURY (Street and number, or location, and city, and zip) <b>NO</b>		126. SIGNATURE OF CORONER / DEPUTY CORONER <b>NO</b>		127. DATE (month/year) <b>NO</b>	
127. DATE (month/year) <b>NO</b>		128. TYPE, NAME, TITLE OF CORONER / DEPUTY CORONER <b>NO</b>		129. STATE REGISTER <b>A B C D E</b>		130. FAX AUTH/F <b>010001004250051</b>	

**CERTIFIED COPY OF VITAL RECORDS**

STATE OF CALIFORNIA } SS **JUL 24 2019** DATE ISSUED:  
 COUNTY OF SAN LUIS OBISPO }  
 This is a true and exact reproduction of the document officially registered and placed on file in the office of the SAN LUIS OBISPO COUNTY HEALTH DEPARTMENT.



Dr. Penny Borenstein Health Officer

This copy not valid unless prepared on engraved border displaying seal and signature of County Registrar.

**ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE**





**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**  
**COUNTY OF SAN LUIS OBISPO**  
 SAN LUIS OBISPO, CALIFORNIA

3052019139922

**CERTIFICATE OF DEATH**  
 DATE OF DEATH: 07/10/2019  
 USE BLACK INK ONLY FOR SIGNATURES AND INITIALS OR ALTERATIONS  
 45-10075-306

STATE FILE NUMBER: 3052019139922		DATE OF DEATH: 07/10/2019		3201940001238	
1. NAME OF DECEDENT - FIRST, MIDDLE, LAST <b>ROBERT</b>		2. MIDDLE <b>LEE</b>		3. LAST (Family) <b>ROWAN</b>	
4. DATE OF BIRTH (month/day/year) 07/04/1934		5. AGE (yrs.) 85		LOCAL REGISTRATION NUMBER	
8. BIRTH STATE/FOREIGN COUNTRY IL		10. SOCIAL SECURITY NUMBER 352-24-4538		11. EVER IN U.S. ARMED FORCES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
13. EDUCATION - Highest Level Degree (see instruction on back) BACHELOR		14.15. WAS DECEDENT HISPANIC/LATINICAL/SPIRANISH? (if yes, see instruction on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		12. MARITAL STATUS (SPOUSE at Time of Death) MARRIED	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED PILOT		18. RACE OF DECEDENT (see instruction on back) CAUCASIAN		16. DATE OF DEATH (month/day/year) 07/07/2019	
20. DECEDENT'S RESIDENCE (Street and number, or location) 226 SOUTH ALPINE STREET		19. YEARS IN OCCUPATION 40		8. HOUR (24-hour) 2218	
21. CITY ARROYO GRANDE		23. ZIP CODE 93420		24. YEARS IN COUNTY 45	
26. INFORMANT'S NAME, RELATIONSHIP ARLENE ROWAN, SPOUSE		25. STATE/FOREIGN COUNTRY CA		27. INFORMANT'S MAILING ADDRESS (Street and number, or care center, school, city or town, state and zip) 226 SOUTH ALPINE STREET, ARROYO GRANDE, CA 93420	
28. NAME OF SURVIVING SPOUSE(SPOUSE(S)) ARLENE		29. MIDDLE CHRISTINE		30. LAST (BIRTH NAME) PAULY	
31. NAME OF FATHER/PARENT - FIRST LORENZO		32. MIDDLE LEE		33. LAST ROWAN	
35. NAME OF MOTHER/PARENT - FIRST HELEN		36. MIDDLE -		37. LAST (BIRTH NAME) KOTECKI	
34. BIRTH STATE IL		38. BIRTH STATE WI		40. PLACE OF FINAL DISPOSITION RESIDENCE OF ARLENE ROWAN 226 SOUTH ALPINE STREET, ARROYO GRANDE, CA 93420	
41. TYPE OF DISPOSITIONS CR/RES		42. SIGNATURE OF EMBALMER NOT EMBALMED		43. LICENSE NUMBER	
44. NAME OF FUNERAL ESTABLISHMENT NEPTUNE SOCIETY		45. LICENSE NUMBER FD1309		46. SIGNATURE OF LOCAL REGISTRAR PENNY BORENSTEIN, MD	
47. DATE (month/day/year) 07/10/2019		48. SIGNATURE OF LOCAL REGISTRAR		49. DATE (month/day/year) 07/10/2019	
103. PLACE OF DEATH FRENCH HOSPITAL MEDICAL CENTER		102. IF HOSPITAL, SPECIFY ONE: <input checked="" type="checkbox"/> H <input type="checkbox"/> ER/OP <input type="checkbox"/> OOR <input type="checkbox"/> HOME <input type="checkbox"/> OTHER		104. CITY SAN LUIS OBISPO	
104. COUNTY SAN LUIS OBISPO		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 1911 JOHNSON AVE		106. CITY SAN LUIS OBISPO	
107. CAUSE OF DEATH Enter the chain of events - (Disease, injury, or complication) - that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or circulatory fluctuation without showing the etiology. DO NOT abbreviate. IMMEDIATE CAUSE (Final disease or condition resulting in death) ASPIRATION PNEUMONIA ESOPHAGEAL STENOSIS		108. DEATH REPORTED TO CORONER (Check all that apply) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		109. BODYPH PERFORMANCE (a) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> (b) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> (c) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> (d) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
110. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 ATRIAL FIBRILLATION, HYPERTENSION, MULTIPLE CEREBROVASCULAR ACCIDENTS, FAILURE TO THRIVE		111. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 110? (If yes, list type of operation and date) NO		112. IF FRAGILE PRECINCT (LAST YEAR) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNK <input type="checkbox"/>	
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since: Decedent Last Seen Alive: 07/01/2019 07/07/2019		115. SIGNATURE AND TITLE OF CERTIFIER MICHAEL BRIAN HAJDUK M.D.		116. LICENSE NUMBER A84931	
118. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH: Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Cause Not Determined <input type="checkbox"/>		117. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE MICHAEL BRIAN HAJDUK M.D. 1023 NIPOMO ST STE 110, SAN LUIS OBISPO, CA 93401		119. DATE (month/day/year) 07/09/2019	
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		120. INJURED AT WORK? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNK <input type="checkbox"/>		121. INJURY DATE (month/day/year) 122. HOUR (24-hour)	
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)		127. DATE (month/day/year)		128. TYPE NAME, TITLE OF CORONER/DEPUTY CORONER	
125. LOCATION OF INJURY (Street and number, or location, and city and zip)		128. SIGNATURE OF CORONER/DEPUTY CORONER		129. TYPE NAME, TITLE OF CORONER/DEPUTY CORONER	
STATE REGISTRAR		FAX AUTH#		CENSUS TRACT	

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 COUNTY OF SAN LUIS OBISPO } DATE ISSUED:  
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\*000433194\*

Dr. Penny Borenstein Health Officer  
 County Registrar



PRINTED ON RECYCLED PAPER

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



DECLARATION OF TRUST

1. NAME OF TRUST

THE NAME OF THIS TRUST IS: R & A ROWAN TRUST.

2. TRUST ESTATE

ROBERT L. ROWAN AND ARLENE C. ROWAN, HUSBAND AND WIFE THE SETTLORS HEREIN, DECLARE THAT THEY HAVE SET ASIDE AND HOLD IN THIS TRUST ALL THEIR INTEREST IN THAT PROPERTY DESCRIBED IN SCHEDULE "A", NOTARIZED ON EVEN DATE HERewith, ATTACHED HERETO, AND MADE PART HEREOF. PROPERTY MAY BE ADDED TO THIS TRUST BY SETTLORS OR TRUSTEES BY TRANSFERRING LEGAL TITLE TO THE TRUST AND BY LISTING IT ON SCHEDULE "A" WITHOUT FURTHER NOTARIZATION. PROPERTY WHOSE LEGAL TITLE HAS BEEN TRANSFERRED TO THIS TRUST SHALL BECOME TRUST PROPERTY EVEN IF IT IS NOT LISTED ON SCHEDULE "A". THE SETTLORS OR TRUSTEES MAY PLACE IN THIS TRUST BANK ACCOUNTS, INSURANCE POLICIES, SECURITIES, MUTUAL FUNDS, STOCK BROKERAGE ACCOUNTS, OTHER PERSONAL PROPERTY, REAL PROPERTY OR ANY OTHER TANGIBLE OR INTANGIBLE ASSET NOT RESTRICTED BY LAW. ALL TRUST PROPERTY SHALL BE HELD, ADMINISTERED AND DISPOSED OF AS SET FORTH IN THIS TRUST.

3. POWERS RESERVED TO SETTLORS

DURING SETTLORS' LIFETIMES ALL RIGHTS TO THE INCOME, PROFITS OR CONTROL OF TRUST PROPERTY SHALL BE RETAINED BY SETTLORS IN ACCORDANCE WITH AND ADMINISTERED UNDER THE FOLLOWING TERMS OF THIS PROVISION:

a. DURING THEIR JOINT LIFETIMES EITHER SETTLOR SHALL HAVE THE RIGHT TO REVOKE THIS TRUST IN WRITING TO TRUSTEE(S) WITHOUT NOTIFYING ANY BENEFICIARY. THIS TRUST AND ANY "A" SUBTRUST BECOMES IRREVOCABLE ON LAST SETTLOR DEATH.

b. UPON FIRST SETTLOR DEATH, SURVIVING SETTLOR SHALL NOT HAVE THE RIGHT TO REVOKE THIS TRUST. IF THIS TRUST IS SPLIT INTO "A/B" TRUSTS UPON THE FIRST SETTLOR DEATH, (see provision "i" hereinafter) SURVIVING SETTLOR SHALL NOT HAVE THE RIGHT TO REVOKE THE SURVIVOR'S SUBTRUST "A".

c. DURING THEIR JOINT LIFETIMES SETTLORS BY, JOINT ACTION, MAY AMEND THIS TRUST.

///  
///  
///

2 *R.L.R. acc*

DECLARATION OF TRUST

NAME OF TRUST: R & A ROWAN TRUST

DATE OF TRUST: MARCH 10, 1994

TRUSTEES: ROBERT L. ROWAN, ARLENE C. ROWAN

SUCCESSOR TRUSTEE: PATRICIA C. ROWAN  
ALTERNATES: WILLIAM JOHNSON  
WILLIAM & SALLY WEITKAMP