

MINNESOTA SECRETARY OF STATE NOTICE OF INTENT TO APPOINT

(One copy of this form is to be completed for each appointment)

IT IS THE INTENT OF THE APPOINTING AUTHORITY TO APPOINT:

Jessica Velasco

Name of appointed member

313 Delaware, Adrian, MN 56110

Preferred Mailing Address*

(* This information will appear on the Office of the Secretary of State web site: www.sos.state.mn.us)

AS A MEMBER OF THE: Community Solutions Advisory (CSA) Council

Name of board, council, commission, or task force

FOR A TERM BEGINNING: October 1, 2021, AND ENDING June 30, 2023

TO SERVE AS: Latinx Community

Type of member: i.e., resident of specific district/county, public or professional member, etc. as required by law

REPLACING: Luisa Trapero.

Name of previous member or indicate "New Position" or "Reappointment"

I affirm that the foregoing is a full and true statement pursuant to Minnesota Statutes 15.0957, subdivision 6.

Appointing Authority:

| Date: 9/30/202

Signature:

Minnesota Statutes 15.0597, subdivision 6, requires that the appointing authority for a multi-member agency, as defined in Minnesota Statutes 15.0597, subdivision 1, submit written notification of the name of the person the appointing authority intends to appoint at least <u>five</u> days before the effective date of the appointment to the Secretary of State.

If the appointing authority intends to appoint a person other than one for whom the Secretary of State has forwarded an application, the appointing authority shall complete an application on behalf of the appointee and submit it to the Secretary of State with the completed Notice of Intent to Appoint form.

Mail or fax this completed form to: 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

Date Filed: October 5, 2021 Document Number: 220959

Office of the Minnesota Secretary of State,

Steve Simon

Or deliver in person to: Room 180 of the State Office Building. Phone: 651-297-5845