APPLICATION FOR APPOINTMENT TO COUNTY OF LAKE COMMERCIAL CANNABIS TASK FORCE TO UPDATE NEW ARTICLE 73 OF CHAPTER 21

Name of Applicant: Lori Correia

Home Address: 12240 High Valley Road City: Clearlake Oaks ZIP: 95423

Mailing Address: Same as above City: Same as above ZIP: Same as above

Occupation: Server, bartender, ranch hand Email: ljdk2007@aol.com

Home Phone: (707)225-2626 Work Phone: ( ) Supervisorial District 3

Name of Board/Committee/Commission(s) you are interested in serving on:
Commercial Cannabis task force

Board/Committee/Commission category under which you are applying, if applicable:
Community Development Department (cannabis task force)

List past or present County appointments, as well as any other public service appointments, or elected positions held (please list dates served):
N/A

Please briefly explain why you would like to serve, what special qualifications or expertise you may have for the position and any other information you would like to include as part of your application:
What I have to offer is first hand experience on the positives and negatives of a irresponsible grower and how we can learn from all the facts.

List community organizations to which you belong:
Thank you for considering my application and even if Im not selected I hope I will be able to share with you the positives and negatives that I experienced first hand living next to a very large cannabis growing operation. Thank you ☺

Convictions and Penalties – Have you ever been convicted of a felony? If yes, give date(s), location(s) and penalties. (Convictions are evaluated for each position and are not necessarily disqualifying.)
NA

List any affiliation you or your spouse has with public service agencies:
NA

I certify that the above information is true and correct, and I have read the Lake County Advisory Board, Committee and Commission Conflict of Interest Policy. I agree to abide by that policy and to the best of my knowledge, I have no conflict of interest.

(Signature) 06/06/22 (Date)

PLEASE RETURN COMPLETED FORM TO:

Mary Darby, Director of CDD
Community Development Department
mary.darby@lakecountyca.gov
255 N. Forbes St.
Lakeport, CA 95453
FAX (707) 263-2225

For Board Use Only:
APPOINTED YES___ NO___
APPOINTED ON: _____
TERM EXPIRES: _____