



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

Name of Applicant: Donna Mackiewicz

Home Address: 576 Surf Lane City: Clearlake Oaks ZIP: 95423

Mailing Address: P O Box 1612 City: Clearlake Oaks ZIP: 95423

Occupation: retired educator/volunteer Email: donnammackiewicz@gmail.com

Home Phone: (405) 227-6020 Work Phone: (405) 227-6020 Supervisorial District 3

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

Cannabis Ordinance Task Force

Board/Committee/Commission category under which you are applying, if applicable:

Community Development Department

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:

Representing the environmental community, my life mission is to advance the impact of environmental & outdoor education (inclusive to all learners) and protect Lake County's native plants, trees, animals as the legal cannabis industry grows. My expertise is birds (behavior, habitat, sightings recorded through Cornell University's eBird community).

List community organizations to which you belong:

current
Oklahoma Environmental Assoc. of Educators (Board Secretary), Redbud Audubon Society (Conservation/VP), CA Bluebird Recovery-Lake Co. Coordinator, Sierra Club N. CA Forest Committee/Oaks group committee/secretary, L.C. Land Trust-Rodman Committee, CLO Keys Club-librarian, OK Master Naturalist Board, Friends of Martin Park, OKC Board President, Girl Scouts USA-40 years

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.)

None

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

None

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.

DMackiewicz
(Signature)

June 5, 2022
(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: _____