



APPLICATION FOR  
APPOINTMENT TO COUNTY OF LAKE  
ADVISORY BOARD, COMMISSION OR COMMITTEE

RECEIVED

COUNTY OF LAKE  
BOARD OF SUPERVISORS /  
ADMINISTRATIVE OFFICE

Name of Applicant: Kristen Jacob GROTE

Home Address: [REDACTED] City: Lower Lake ZIP: 95457

Mailing Address: [REDACTED] City: Lower Lake ZIP: 95457

Occupation: Retired Email: Bergen1939@aol.com

Home Phone: (209)6246258 Work Phone: ( ) Supervisorial District

Name of Board/Committee/Commission(s) you are interested in serving on:  
Lower Lake County Waterworks District No 1

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

List past or present County appointments, as well as any other public service appointments, or elected positions held (please list dates served):  
NONE US ARMY 1963-1965

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:

I like to help and learn and serve  
Lower Lake Waterworks District in any way I can.

List community organizations to which you belong:  
Norwegian Club San Francisco  
Sons of Norway - San Francisco Clear Lake

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.)

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

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.

Kristen Jacob Grote  
(Signature)

3/29-2024  
(Date)

PLEASE RETURN COMPLETED FORM TO:

Clerk of the Board of Supervisors  
255 N. Forbes St.  
Lakeport, CA 95453  
FAX (707) 263-2207

For Board Use Only:  
APPOINTED YES ☐ NO ☐  
APPOINTED ON:   
TERM EXPIRES: