



APPLICATION FOR
APPOINTMENT TO COUNTY OF LAKE
ADVISORY BOARD, COMMISSION OR COMMITTEE MAY 17 2023

RECEIVED

COUNTY OF LAKE
BOARD OF SUPERVISORS /
ADMINISTRATIVE OFFICE

Name of Applicant: Barbara Arviso
Home Address: 13202 1st St. 1916 City: Clearlake Oaks ZIP: 95423
Mailing Address: P.O. Box 1916 City: 11 ZIP: 01
Occupation: Caregiver Email: hdb1ueyes@msn.com
Home Phone: 562-743-5217 Work Phone: () Supervisorial District 3 Lake County

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

LAKE ADVISORY BOARD

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

(caregiver, senior, or) disabled community member

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

none

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:

lots of direct caregiver experience + I'm a good talker
& good listener. Do my best to do whatever needs to be done.
As a disabled person I know what it feels like to
need care & get care.

List community organizations to which you belong:

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.

Barbara Arviso
(Signature)

5/8/23
(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: _____