

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

Name of Applicant: Shanda Harry
Home Address: 36 55 Lakeshore Blud City: Jakob CA ZIP: 95453
Mailing Address: City: ZIP:
Occupation: Deputy County Council Email: Shanda. Harry & lakerount
Home Phone: AST V99-0200 Work Phone: 161-263-230 Supervisorial District
Name of Board/Committee/Commission(s) you are interested in serving on:
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):
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: The lease that access to the work of the control of the
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. (Signature)
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:

RECEIVED

DEC 28 2016

COUNTY OF LAKE BOARD OF SUPERVISORS



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

Name of Applicant	t: Dennis A. F	ordham					
Home Address:	10739 Harbor	Rd.	Ci ⁻ Kelsey	ville, CA	ZIP:	95451	
Mailing Address:	Same		City: *		ZIP:		
Occupation: Attorney			Email: denn	Email: dennis@denni&fordhamlaw.com			
Home Phone: (7	07 ₎ 2770702 _{Work} I	Phone: (^{7 0}	2633235	Supervisorial Dís	strict	5	
Name of Board/Cor Law Library	nmittee/Commission(s) Trustee	you are inte	rested in serving	on:			
Board/Committee/C	Commission category ur	nder which yo	ou are applying, il	applicable:			
held (please list dat	•						
Law Library	Trostees						
List community orga Lakeport Ro	anizations to which you tary, Lower La	belong: ke U. Me	ethodist Ch	urch			
Convictions and Pe	nalties – Have you eve	r been convid	cted of a felony?	If yes, give date((s), location	n(s) and	
penalties. (Convicti None.	ions are evaluated for e	each position	and are not nece	essarily disqualify	ing.) 		
List any affiliation yo St. Helena	ou or your spouse has v Hospital - Cle	with public se arlake	ervice agencies: & Adventist	: Middleton	n Clin	ic (spouse)	
Committee and	above information is to	of Interest Po					
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my knowledge,	(Signature)	h_		$\frac{2}{2/2/2}$	016	_	