

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

RECEIVED

MAR 0 2 2017

COUNTY OF LAKE

Name of Applicant: HARRIE W.	ACO	CHYLSONS
Home Address: 3489 Scotts	Valley RJ City: LAKEDOR	ZIP: 75453
Mailing Address:		ZIP:
Occupation: RETIRED	Email: Karal	e. Ward Eyahoo. com
Home Phone: (Tile) 601-3502 Work	k Phone: ( ) Sup	pervisorial District
Name of Board/Committee/Commission(	(s) you are interested in serving on:	exerts Unlay Flood
Board/Committee/Commission category		~
List past or present County appointments held (please list dates served):		e appointments, or elected positions
Please briefly explain why you would like position and any other information you was a live in Scotts Valley and the started from the started	would like to include as part of your a would like to assest in m the Army Corps of E op hazardous Wastes	s or expertise you may have for the pplication: exploring options to reclude rectard for course sides, I worked with many > Jetland Restoration Coulition
Convictions and Penalties – Have you expenalties. (Convictions are evaluated for	ver been convicted of a felony? If yer each position and are not necessa	es, give date(s), location(s) and rily disqualifying.) <sub>いい</sub> らに
List any affiliation you or your spouse ha	s with public service agencies:	10E
I certify that the above information Committee and Commission Conf my knowledge, I have no conflict of		the Lake County Advisory Board, de by that policy and to the best of
(Signature)	<u> </u>	(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 YESNO  APPOINTED ON:  TERM FXPIRES:



#### **APPLICATION FOR** APPOINTMENT TO COUNTY OF LAKE ADVISORY BOARD, COMMISSION OR COMMITTEMAR 1 6 2017

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COUNTY OF LAKE

		BOARD OF SOFERFEE
Name of Applicant: RHOND	A ARMSTRONG	
Home Address: 3292 Scotts VAII	ey Rs. City: LAKEP	DORT ZIP: 95453
Mailing Address: Same As ABOX		ZIP:
Occupation: Refired ADMINT C	FO Suc Mg Email: RRR	4053@ aol.com
Home Phone: (707)263-3612-WORK F		
Name of Board/Committee/Commission(s)  Scotts VAIJey (0 Mm)	you are interested in serving on anity Advisory C	ouncil
Board/Committee/Commission category un		oplicable:
ist past or present County appointments, a seld (please list dates served):	Clara County - LI	ce appointments, or elected positions ABOR REJATIONS NEGOTIATORS USSOR'S ABUISMY BOARD PS + TRAINING + STAFF Development
accessability as well	Id like to include as part of your rays, both short ten fuer heven if it Ac atts VAI by I a reporting require	
convictions and Penalties – Have you ever enalties. (Convictions are evaluated for e	been convicted of a felony? If yeach position and are not necess	yes, give date(s), location(s) and arily disqualifying.) ハルー
ist any affiliation you or your spouse has very lettined by CFO of Asse	ssors Office-Santalla	
I certify that the above information is Committee and Commission Conflict my knowledge, I have no conflict of in	of Interest Policy. I agree to ab	d the Lake County Advisory Board Emminal ide by that policy and to the best of GRAND Jury
Klanda Urms (Signature)	trong M	(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: \_



#### **APPLICATION FOR** APPOINTMENT TO COUNTY OF LAKE ADVISORY BOARD, COMMISSION OR COMMITTEE MAR 0 6 2017

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COUNTY OF LAKE BOARD OF SUPERVISORS

Name of Applicant: TOD PATTER	
Home Address: 2162 SCOTTS VLY RD City: LAKEN	21P: 95453
Mailing Address: 5 A W 2 City:	ZIP:,
Occupation: CALFIRE BATTALION CHIEF Email: Tod. 707-272-2116 707-272-	Patten@fire.ca.gov
Home Phone: 707-272-2116 Work Phone: 707-272-116 Sup	pervisorial District
Name of Board/Committee/Commission(s) you are interested in serving on:	PD
Board/Committee/Commission category under which you are applying, if applying the state of the s	plicable:
List past or present County appointments, as well as any other public service held (please list dates served):  \[ \text{LANS COUNTY EMCC SNOSO} \]	
Please briefly explain why you would like to serve, what special qualification position and any other information you would like to include as part of your a SCOTS VALLEY RESERVED TO SCOTS VALLEY	application:
Convictions and Penalties – Have you ever been convicted of a felony? If you penalties. (Convictions are evaluated for each position and are not necessary.	es, give date(s), location(s) and arily disqualifying.)
List any affiliation you or your spouse has with public service agencies:	ION CHIEF
I certify that the above information is true and correct, and I have read Committee and Commission Conflict of Interest Policy. I agree to abid 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:



## APPLICATION FOR APPOINTMENT TO COUNTY OF LAKE APPOINTMENT TO COUNTY OF LAKE BOARD OF SUPERVISORS

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MAR 1 0 2017

Name of Applicant:	- EISENHOUR	
Home Address: 3682 Scotts	WIEW City:   AV	SDIDLE ZIP: 95453
Mailing Address: PO-Box 79		LAKE ZIP: 95457
Occupation: CONTRACTOR	Email: 20Be	SYTICISENHOUR PATTINE
Home Phone: 10/355-1166 Work	Phone: ( ) Su	pervisorial District
Name of Board/Committee/Commission(s	ODD CONTROL	LINA SCOTT
Board/Committee/Commission category u	nder which you are applying, if a	oplicable:
List past or present County appointments, held (please list dates served):	as well as any other public servi	ce appointments, or elected positions
Please briefly explain why you would like to position and any other information you would like to position you would like	uld like to include as part of your  PETTO BY THE  EVY BERDIE  THE WARRUNG	application:
Convictions and Penalties – Have you even penalties. (Convictions are evaluated for the NO		
List any affiliation you or your spouse has		
I certify that the above information is Committee and Commission Conflic my knowledge. I have no conflict of	ct of Interest Policy. I agree to ab	d the Lake County Advisory Board, ide by that policy and to the best of
_ GONHO	u _1	MAKEN 2017
(Signature)		(Date)
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### **APPLICATION FOR** APPOINTMENT TO COUNTY OF LAKE ADVISORY BOARD, COMMISSION OR COMMITTEE AR 1 3 2017

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COUNTY OF LAKE

		DOVING OF DOVERVED	1/5
Name of Applicant: Robert	(Bob) A. Ru	DDOCK	
Home Address: 39 12 500tts 1	Valley RCity: Lak	eport ZIP: 9545	3
Mailing Address: 39125.V-		ZIP:	
Occupation: Retired Fa	rmer Email: yu	ddocke facific	net-
Home Phone: <u>( ′7 0′)</u> <u>ያይኔ -4ኇ የ</u> Work Ph	one: ( ) Sup	ervisorial District 4	
Name of Board/Committee/Commission(s) y  Scotts Valley	Water Advis		ee
Board/Committee/Commission category und DISTRICT FOUR VOTE			
List past or present County appointments, as held (please list dates served):  Hartley Cemetery Scotts Creek Ad.  Please briefly explain why you would like to	District Board	Priox 1998 ex-under Karen	Macks
position and any other information you would Farmed + Lived in Nave days	d like to include as part of your a	polication:	1 tory.
List community organizations to which you be Lalle Co Farm Bur			
Convictions and Penalties – Have you ever penalties. (Convictions are evaluated for ea			
List any affiliation you or your spouse has wi Spouse: Mendo-Lak	th public service agencies:	are Ombuds ma	N
I certify that the above information is t Committee and Commission Conflict of my knowledge, I have no conflict of in	rue and correct, and I have read of Interest Policy. I agree to abid terest.	the Lake County Advisory Board, le by that policy and to the best of	
Robert A. Rucht (Signature)	<u></u>	<u>−1 0 −1 7</u> (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: \_\_\_\_