



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

RECEIVED

AUG 07 2017

COUNTY OF LAKE  
BOARD OF SUPERVISORS

Name of Applicant:

Stacey Armstrong

Home Address:

16337 Daly St.

City:

Lower Lake

ZIP:

95457

Mailing Address:

P.O. Box 152

City:

Lower Lake

ZIP:

95457

Occupation:

Office manager / business owner

Email:

armstrongs1@live.com

Home Phone:

(707) 245-3047

Work Phone:

(707) 995-3737

Supervisorial District

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

Lower Lake County Waterworks

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

advisory board

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:

I have purchased my property in Lower Lake for 17 years, and also own a business in Lower Lake (Concrete Pools & Restoration). I have business knowledge (30 years in bookkeeping) and communication (10 yrs as school secretary @ Yuba City District. Just acquired real estate license and an associate in business management from Mendocino College.

List community organizations to which you belong:

None

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.)

NO

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.

(Signature)

(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: \_\_\_\_\_