



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

RECEIVED

JUL 24 2017

COUNTY OF LAKE  
BOARD OF SUPERVISORS

Name: Roland Ledoux E-mail: r.ledoux@mchsi.com

Home Address: 15759 Joseph Trl City: Lower Lake Zip: 95457

Mailing Address: 15759 Joseph Trl City: Lower Lake Zip: 95457

Occupation: Retired

Home Phone: (707) 994-0637 Work Phone: (707) 367-7824 Supervisorial District: 1  
CELL

Name of Board/Committee/Commission(s) of which you are applying:  
Board of Directors - Lower Lake Water

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):

Lake County Fish & Wildlife Advisory Board (present)  
Lower Lake Water (past)

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 believe my past experience will help the water  
company move forward

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.)

NONE

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.

Roland Ledoux  
(Signature)

7-20-17  
(Date)

PLEASE RETURN COMPLETED FORM TO:

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

Appointed: \_\_\_\_\_ Not Appointed: \_\_\_\_\_

Date: \_\_\_\_\_

Term Expires: \_\_\_\_\_