

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

Name of Applicant: Shanda Harry		
Home Address: 255 M. Forbes St. City: Lake port ZIP: 95453		
Mailing Address: City: ZIP:		
Occupation: Dep. Country Counsel Email: Shanda. Harry Wlake countyca.		
Home Phone: (707)499-0208 Work Phone: (707)263-232 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: I am Committed to the idea that people should wave coccess to lead information and would like to help facilitate that any manner. I can. 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) (Date)		
PLEASE RETURN COMPLETED FORM TO: Clerk on 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

Name of Applicant: DENNIS A. FORDHAM		
Home Address: 10739 Harbor Pd City: Wel	senull ZIP: 95451	
Malling Address: 10739 Har Gor Tel City: Nelseyille ZIP: 95451		
Occupation: ATTORNEY Email: dennis@dennisfordhamlaw.com		
Home Phone: (707 277-0702 Work Phone: (707) 263-3235 Supervisorial District		
Name of Board/Committee/Commission(s) you are interested in serving on: LAKE COUNTY LAW LIBRARY BOARD OF TRUSTEES		
Board/Committee/Commission category under which you are applying, if applicable: N/A		
List past or present County appointments, as well as any other public service held (please list dates served): Trustee, Lake County Law Library since 2006	appointments, or elected positions	
Please briefly explain why you would like to serve, what special qualifications position and any other information you would like to include as part of your a	pplication:	
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 Committee and Commission Conflict of Interest Policy. I agree to abid my knowledge, I have no conflict of interest.	the Lake County Advisory Board, e by that policy and to the best of (2, (20, 7) (Date)	
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