



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

Name of Applicant: Timothy Samuel Chiara

Home Address: 3918 Manzanita Drive City: Nice ZIP: 95464

Mailing Address: P.O. Box 9 City: Nice ZIP: 95464-0009

Occupation: Retired Email: timchiara@hotmail.com

Home Phone: (707) 274-2469 Work Phone: () Supervisorial District 3

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

WRTH

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):

No county appointments. No public service appointments.
No elected positions held

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:

Curiosity about government processes
my ability to serve
uncharted territory

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.

T.S. Chiara
(Signature)

12/07/2017
(Date)

EASE 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: _____



Service of

out of your