



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

RECEIVED

OCT 16 2018

COUNTY OF LAKE
BOARD OF SUPERVISORS

Name: Bob Renker Email: ROBERTRENKER@HOTMAIL.COM
Home Address: 5677 OAK Ridge Dr. City: Kelseyville Zip: 95451
Mailing Address: P O Box 221 City: Kelseyville Zip: 95451
Occupation: RETIRED
Home Phone: (707) 272-8268 Work Phone: (272) 8268 Supervisorial District 5

Name of Board/Committee/Commission(s) of which you are applying:

Kelseyville Cemetery District Board

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

member

List past or present County appointments, as well as any other public service appointments, or elected positions held (please list dates served):

N/A

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 A MEMBER (FINANCIAL OFFICER) OF THE AMERICAN
LEGION POST 194. I WORK WITH THE KELSEYVILLE
CEMETARY STAFF CONCERNING PLOTS FOR VETERANS.
I MAKES/SENSE TO BE ON THE CEMETERY BOARD.

List community organizations to which you belong:

Kelseyville Lions Club (DIRECTOR)
AMERICAN LEGION POST 194 (FINANCIAL OFFICER)
LAKE COUNTY PAIR FOUNDATION (VICE PRESIDENT)

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.)

N/A

List any affiliation you or your spouse has with public service agencies:

(Me) LAKE COUNTY ASSESSOR/RECONPER (RETIRED) AUDITOR/APPRaiser
(Wife) Kelseyville UNIFIED School District (RETIRED) COOK
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.

Robert D Renker
(Signature)

10/16/2018
(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: _____