



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

RECEIVED

SEP 16 2019

COUNTY OF LAKE  
BOARD OF SUPERVISORS

Name of Applicant: HANK LESCHER  
Home Address: 16391 SPRUCE GROVE RD City: LOWER LAKE ZIP: 95457  
Mailing Address: 16391 SPRUCE GROVE RD City: HIDDEN VALLEY RD ZIP: 95467  
Occupation: CURRENT HEMP GROWER & RETIRED C-STORE OWNER Email: hanklescher@msn.com  
Home Phone: (707) 953-9190 Work Phone: (707) 953-9190 Supervisorial District: 1

Name of Board/Committee/Commission(s) you are interested in serving on:  
ad hoc hemp advisory committee

Board/Committee/Commission category under which you are applying, if applicable:  
I'd LIKE TO BE THE HEMP ADVOCATE PERSON

List past or present County appointments, as well as any other public service appointments, or elected positions held (please list dates served):  
SERVED WITH THE FOLKS DEVELOPING THE MIDDLETOWN AREA PLAN

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 would like to serve on the Committee as the Hemp Advocate because I have become very well educated concerning all of the issues and what will meet the needs of all parties. I have attended and spoken at all of the hearings and several people told me that I was the most knowledgeable and articulate spokesperson for the hemp industry. I have a graduate degree in clinical psychology and am a very good listener and problem-solver. Hopefully the Supervisor considering me will recall the 4 Pg. letter I wrote to him prior to the 1<sup>st</sup> Hearing.

List community organizations to which you belong:

MIDDLETOWN AREA TOWN HALL (MATH)

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:

ST. VINCENT DE PAUL

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.

Hank Lescher  
(Signature)

9/16/19  
(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: \_\_\_\_\_