

SEP 19 2019



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

As a retired Food Service Director + Assistant Superintendent of Business for school districts, I am very familiar with working with different stakeholders to collaborate + find solutions to issues.

Name of Applicant: Mary Draper

Home Address: 9475 Bottle Rock City: Kelseyville ZIP: 95451

Mailing Address: 9475 Bottle Rock City: Kelseyville ZIP: 95451

Occupation: Cannabis Email: mary.draper55@yahoo.com

Home Phone: (209) 915-8963 Work Phone: ( ) Supervisorial District 5 Rob Brown

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

Cannabis / Hemp Ad-Hoc committee

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

Cannabis

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

None

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:

BS: Accounting MBA - 2005 University of the Pacific  
Magna Cum laude trained mediation, negotiation - Sacramento  
10 year resident of Lake County. I am a good listener  
and reasonable person and am confident in coming to a  
List community organizations to which you belong: reasonable solution.

Currently I have 4 one acre cannabis cultivation  
muja in Kelseyville and 1 one acre Early Activation  
in Lucerne. Lake County Growers Alliance; Government  
Affairs Committee

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.

Mary Draper  
(Signature)

9-19-2019  
(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: \_\_\_\_\_