

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

7 8:16am RECEIVED

OCT 1 7 2019

COUNTY OF LAKE BOARD OF SUPERVISORS

Name of Applicant:	Brianna	a Cool	iC		
Home Address: [D	150 Bell a	Ve Ci	ty: Lower	lale z	IP: 95457
Mailing Address: 2.1	D.BOX 167	[2 ci	ty: Lower	lake z	IP: 95457
Occupation: Bay	tendorly	AV. Er	nail: Breez	ubb5a	Luahoo.com
	7 295.6496 Pr		<i>T</i>	110	Molu Simo
Name of Board/Comm	nittee/Commission(s) y		d in serving on:	trict#1	
Board/Committee/Cor	mmission category und	der which you are	e applying, if app	licable: MWW.	
List past or present Co held (please list dates	sly slyved	on the B	oard of I		Girls Club.
position and any other	why you would like to rinformation you would like to the like to t	d like to include	as part of your ap	oplication:	manu ulars
_ COVILNATO	izations to which you be 1/m extru	mely in	volved wi	th yout	n my sons
Convictions and Pena	ulties – Have you ever ns are evaluated for ea NO	been convicted (ach position and	of a felony? If ye are not necessar	s, give date(s), lo ily disqualifying.)	cation(s) and
List any affiliation you	or your spouse has w	ith public service	agencies:		
Committee and	above information is t Commission Conflict I have no conflict of in	of Interest Policy	and I have read . I agree to abid	the Lake County e by that policy a	Advisory Board, nd to the best of
Br	(Signature)	Cool		(Date)	
PLEASE RETURN COMPL	ETED FORM TO:	Clerk of the Boar 255 N. Forbes St Lakeport, CA 954 FAX (707) 263-2	453	For Board Use Only APPOINTED APPOINTED ON TERM EXPIRES	YES NO I: