



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

RECEIVED

NOV 26 2019

COUNTY OF LAKE
BOARD OF SUPERVISORS

Name of Applicant: CATHLEEN MCCARTHY

Home Address: 11236 PINE SUMMIT DR. City: COBB ZIP: 95426

Mailing Address: P.O. BOX 243 City: COBB ZIP: 95426

Occupation: EDUCATOR Email: cobbmccarthy@gmail.com

Home Phone: (707) 928-9973 Work Phone: (510) 295-7497 Supervisorial District: District 5

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

COBB AREA COUNCIL

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):

CITY OF VALLEJO YOUTH ACTIVITIES COMMISSION (91-93)

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 BRING A MOUNTAIN OF ENTHUSIASM AS WELL AS MY SKILLS AND
EXPERTISE AS AN EDUCATOR TO SERVE THE COMMUNITY OF THE
COBB AREA AS ITS ADVOCATE AND ALLY

List community organizations to which you belong:

RELSEYVILLE UNIFIED TEACHERS ASSOCIATION (KUTTA)
SPONSOR/SUPPORTER OF FRIENDS OF BOGGS MOUNTAIN + COBB MOUNTAIN LIONS CLUB
OUR LADY OF THE LAKE LADIES GUILD

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.

Cathleen McCarthy
(Signature)

11/25/19
(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: _____