

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

RECEIVED

DEC 1 0 2020

E COUNTY OF LAKE BOARD OF SUPERVISORS

C	- Marie - Mari		
Name of Applicant	: <u>51501</u>	EN J SCHEP	PER MD.
Home Address: 5	223 PARAD	ESE LAGGON PILY:	LUCERNE ZIP: 9545B
		City:	
Occupation:	LETIRED EX	PHYSICIAN Email: 94	eveschep@icloud.com
Home Phone:(7/2	07) 9984860 Work	Phone: (707)359-5053	eveschep@icloud.com
Name of Board (See		Number of Statements of the condense	
Name of Board/Com	Mice Commission (1907)	B) you are interested in serving o	on:
Roard/Committee/C	ommission category i	under which you are applying, if	applicable:
		zioor iniion you allo applyingi ii	
l let neet or present :	County engointments	se well se any other miblic ear	vice appointments, or elected positions
heid (please list date	on nonveril:		•
	EM	cc for fast soge	ara
Refred n	2019 after	in or outling aga	3 mera encume dicine Practice
Lake Colon	7		
***	White		
Convictions and Per penalties. (Conviction	naities — Have you ev ons are evaluated for	er been convicted of a felony? I each position and are not neces	If yes, give date(s), location(s) and ssarily disqualifying.)
List any atfiliation yo	u or your spouse has	with public service agencies:	
. Committee an	id Commission Conflict of	ct of Interest Policy. I agree to a interest.	ead the Lake County Advisory Board, abide by that policy and to the best of
<i>\$</i> 1,	(Signature)	per MB	12/10/2020
-	(Signature)		(Date)
PLEASE RETURN COM	PLETED FORM TO:	Clerk of the Board of Supervisors 255 N. Forbee St. Leikeport, CA 96463	APPOINTED YES NO
		FAX (707) 269-2207	APPOINTED ON:
			TERM EXPIRES: