

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

Name of Applicant: Andrew	, Peterson		
Home Address: 875/Paradise Valle	ey Blvd City: Luce	TOWE ZIP: 4	5458
Mailing Address: SAMC	City:	ZIP:	
Occupation: Retive O	Email: AND	petersona no	151.001
Home Phone: (707) 998 3034 Work Ph	one: () Su	pervisorial District	3_
Name of Board/Committee/Commission(s) ye	ou are interested in serving on:	Lucery Area To	SWN HAIS
Board/Committee/Commission category und	er which you are applying, if ap	plicable:	
List past or present County appointments, as well as any other public service appointments, or elected positions held (please list dates served):			
Please briefly explain why you would like to sposition and any other information you would like to sposition and any other information you would like to sposition and any other Red such a property development and Caltraps The List community organizations to which you be Clearlage Rotary, Clearlage Rotary, Clearlage Rotary, Clearlage Australians this	Hike to include as part of your of the HANAGEN CEVE PLANAGEN ALDING ON THEFT CALMING ON	application: lopment of Lucern S Mork expantion Hury 20	AND ECONOM
Convictions and Penalties – Have you ever to penalties. (Convictions are evaluated for each of the convictions and Penalties – Have you ever the penalties of the pe	peen convicted of a felony? If y	es, give date(s), location(s	
List any affiliation you or your spouse has wi	th public service agencies:		
I certify that the above information is to Committee and Commission Conflict of my knowledge, I have no conflict of interest (Signature)	of Interest Policy. I agree to ab	the Lake County Advisory de by that policy and to the 2/12/20 (Date)	Board, best of
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 APPOINTED ON: TERM EXPIRES:	NO