

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

Name of Applicant: Marker	tield	
Home Address: 4962 Gade	by La City: Kel sec	Jule ZIP: 9545)
Mailing Address: POB [6]		ZIP:
Occupation: ws. few land u	ranager Email: field	maile@gnail, con
Home Phone: <u>(707-349.409</u> Work I		To the second se
Name of Board/Committee/Commission(s) Board/Committee/Commission category un	50	
Board/Committee/Commission Category to	nder willen you are applying, if ap	phicatic.
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 position and any other information you would like to position you would like t	uld like to include as part of your	application:
Convictions and Penalties – Have you ever penalties. (Convictions are evaluated for explain the conviction of the convictions are evaluated for explain the convictions are evaluated for explain the convictions and Penalties – Have you ever penalties.	each position and are not necess	
I certify that the above information is Committee and Commission Conflic my knowledge, I have no conflict of (Signature)	t of Interest Policy. I agree to abi	
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: