MENDOCINO COUNTY BOARD OF SUPERVISORS
APPOINTMENT OF INTEREST APPLICATION

Committee Name: _____ **Date:** _____

Representational Category: _____

Name: _____ **Phone:** _____

Address (Per Voter Registration): _____

Address (Mailing): _____ **E-mail:** _____

Availability to Attend Meetings:

Night Meetings _____ **Day Meetings** _____

Ukiah Only _____ **Other** _____

Special Expertise, Experience, or Interest in This Area:

_____

_____

_____

_____

_____

I hereby certify that I am a registered voter in the State of California, County of Mendocino, a citizen of the United States, and will be at least 18 years of age at the time of the next election. I am not imprisoned or on parole for the conviction of a felony. I certify under penalty of perjury, under the laws of the State of California, that the information on this application is true and correct.

I understand that assuming this public responsibility could result in public knowledge of my background and/or qualifications, including financial interests.

Applications will be kept on file for one year.

Signature: _____ **Dated:** _____

For Clerk's Use Only

Date Appointed: _____ **Term:** _____

Return completed application to:
The Mendocino County Clerk of the Board's Office
501 Low Gap Road, Room 1010
Ukiah, CA 95482
or Fax to (707) 463-7237