



El Dorado County
In-Home Supportive Services
Advisory Committee

Placerville Senior Center
937 Spring Street
Placerville, CA 95667
Phone: (530) 621-6384
Fax: (530) 295-2598

In-Home Supportive Services (IHSS) Advisory Committee Membership Application

Name: Daryl Sullivan

Mailing Address: _____

Physical Address (if different): _____

Phone Number: Day _____

Evening _____

Email Address: I _____

Please check all categories that apply to you:

- I am a current or past user of home care services.
- I provide home care services to a family member.
- I provide home care services to someone who is not a family member.
- I am a representative of a community based organization or public agency.

If additional space is needed to provide requested information, please attach additional sheets.

1. Why are you interested in being on the IHSS Advisory Committee?

My son receives IHSS services. He lives on the same property but in his own house (6703 Perry Creek Rd.). I believe the process of helping a person in need of IHSS services should and could be improved to help improve the quality of life for recipients. There are many people in our county that unfortunately require assistance and a faster, more efficient way that services can be delivered is my goal.

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COMMUNITY SERVICES

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2. What other kinds of community groups do you belong to now or in the past?

- * Bed & Breakfast Inns of El Dorado County - Immediate Past President for 6 six years.
- * El Dorado County Chamber of Commerce
- * EDC Visitor Authority Advisory Council - 2005 to Present
- * California / Elk Grove Junior Chamber of Commerce (Jaycees) - 1976 - Present

3. What life or work experiences will help you in serving on this committee?

- * Lucinda's Country Inn - Co-Owner of the B&B
- * California Franchise Tax Board - Law Enforcement: Tax Agent, Special Investigator, Illegal Procedures and Office Collections. (Served on the Employees Advisory Committee & Disabled Advisory Committee)
- * Valley-Hi Insurance Services - Owner of the multi-line insurance agency specializing in employees' health benefits

4. List any additional skills or qualifications that would be valuable to this committee:

- * President of the South Coast Springs HOA 1994-1998
- * Held various offices in the California & Elk Grove Jaycees including the Statewide Governmental Affairs Program Manager

Signature: _____



Date: _____



Please return the completed application to:

IHSS Public Authority Office
937 Spring St
Placerville, CA 95667