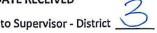
APPLICATION FOR COUNTY OF EL DORADO BOARD, COMMISSION, OR COMMITTEE

Return to: Clerk of the Board of Supervisors **County Government Center** 330 Fair Lane, Placerville, CA 95667 e-mail: edc.cob@edcgov.us

DATE RECEIVED

Copy to Supervisor - District



INSTRUCTIONS: Please complete each item below. Be sure to enter the title of the Board, Commission, or Committee (only one per application please) for which you desire consideration. For more complete information or assistance contact the Clerk of the Board of Supervisors' Office. This application shall be maintained for a

1 D 1/2 1 1 A 1 1 C	
1. Board/Commission Applying for:	2. Today's Date:
Community & Economic Development	3-30-18
3. Name:	4. E-Mail Address:
Harlow Debi	8.41 - 1
Last First Middle	
5. Address:	6. Telephone:
Number Street	Home
Diamond Sorings CH 95619	The state of the s
City Zip Code	Business
7. Occupation/Title:	Employer:
Community Relat, ons Mar	
Community Melat, Onstrugt	El Dorado Disposap
8. List all County board, commissions or committees of which you are now or have been a member. Indicate dates of service.	
BDSWAC · currently but stepping lown end of year.	
9. Summary of qualifications related to group(s) listed above. (What experience or special knowledge do you bring to your area of	
interest?) In volvement with Erese Mant.	
Community Invalvement 25 years warking for EDDS	
assactive of the	
10. Affiliations with professional and/or community groups:	
MORE Kinesis Foudation SS/CrChanler	
MASA Marshall Foudstillore to the	
ASA Wares Fund County Chamber	
11. Why do you seek appointment? inour county. Livelhere over 60yrs.	
h. Maalo Cowwilled	
12. Additional Information: Give any information explaining your qualifications, experience, training, education, volunteer activities,	
community organization memberships, or personal interests that bear on your application for above Board, Commission, or	
Committee Attach additional sheets as necessary	
Mr. Calall Freezelation Regal - 3 Commentes	grant Commette
Casaboard Courulle	MONE Boads 4 Committee
Kewani Basel - Ilaminetto	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
13. Indicate Supervisor who will receive a copy of this application:	
Brian Veer Hange	
Appointees to Boards, Commissions or Committees are not considered to be	e County employees for purposes of benefits, such as
Workers Compensation, health insurance, etc.	
	The desired and company of the Compa
1/hle lacton	3-30-15
Signature of Applicant	Date
arthrapia a cubburgur	DOLL

REVISED 1/6/2011 11:55 AM

You can save this completed application and attached to an email and send to edc.cob@edcgov.us

Spell Check Save Clear Form