

### Profile

Donna S.  
First Name

Patterson  
Last Name

Full/Legal Name (if different than name provided above)

Email Address

[Redacted]  
Street Address

Suite or Apt

[Redacted]  
City

[Redacted]  
State

[Redacted]  
Postal Code

### Mailing Address (if Applicable)

### Voter Registration Address (if different than street address or mailing address)

Home: [Redacted]  
Primary Phone

Home:  
Alternate Phone

### Which Boards would you like to apply for?

In-Home Supportive Services Advisory Council: Submitted

Which position, seat, or representational category would you prefer?

### Availability to Attend Meetings

Day Meetings

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Availability to Attend Meetings (Other)

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## Interests & Experiences

### Special Expertise, Experience, or Interest in This Area?

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R.N. cred. teacher Business Owner [REDACTED]

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Upload a Resume

[REDACTED]  
[REDACTED]

Upload Additional Supporting Documents

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Upload Additional Supporting Documents

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Upload Additional Supporting Documents

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## Certification

Please read the following statements and indicate your acceptance thereof.

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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.

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I Agree \*