

Profile

Jo

Bradley

First Name

Last Name

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

Joann Bradley

Email Address

Primary Phone

Alternate Phone

Street Address

Suite or Apt

City

State

Postal Code

Mailing Address (if different than Street/Physical address)

Are you currently registered to vote at the Street Address you provided?

☒ Yes ☐ No

**Note: If you answered "No" to the previous question and do not upload an Alternate Document Proving Mendocino County Residency or a Request for a Residency Waiver, your application will not be processed.**

Upload Alternate Proof of Residency or Request for Residency Waiver

Which Boards would you like to apply for?

Behavioral Health Advisory Board: Submitted

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

5th District

Availability to Attend Meetings

☒ Day Meetings

Availability to Attend Meetings (Other)

Able to travel around the County

Jo Bradley

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## Interests & Experiences

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

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My son is Bi-Polar. He presented in 1997. Since that time I have educated myself on the disease. I have studied and attended groups trying to keep myself up with current information. I attended Measure B Meetings regularly before I was seated on it. For over 25 years I have sat on County Boards and Commissions. I am well versed in how they function and am trained in Brown Act Practices. I participated in Leadership Mendocino, class XXVII, and graduated. Loved it! Being on BHAB and the Measure B Committee has been very rewarding, and we have accomplished so much. I feel that I have continued to contribute to our Community and County.

[Jo\\_Bradley\\_Resume\\_2024\\_incl\\_Lodge\\_Com.doc](#)

Upload a Resume

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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 resident in the State of California, County of Mendocino and am at least 18 years of age. 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 \*