



**MENDOCINO COUNTY BOARD OF SUPERVISORS**  
**APPOINTMENT OF INTEREST APPLICATION**

COMMITTEE NAME \_\_\_\_\_

Date 8-4-16

Representational Category

B.H.A.B Mendocino County

NAME

Tammy L Lowe

PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

## AVAILABILITY TO ATTEND MEETINGS:

Night Meetings

X

Day Meetings

X

Ukiah Only \_\_\_\_\_

Other

X all County

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

prior member on the board, would like  
to return to the BHAB as soon as  
possible, family member is a  
consumer,

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.

Tammy L Lowe  
Signature

Dated

8-4-16

Date Appointed: \_\_\_\_\_

Term \_\_\_\_\_

## Return completed application to:

The Mendocino County Clerk of the Board's Office  
501 Low Gap Road, Room 1090  
Ukiah, CA 95482  
or fax to (707) 463-4245

CLERK OF THE BOARD - PUBLIC OFFICE HOURS (MONDAY-THURSDAY, 8:00 A.M. - 5:00 P.M.)