Richard	Swedbergh		
First Name	Last Name		
Full/Legal Name (if d	ifferent than name provided above		
Email Address			
Voter Registration A	ddress		
Street Address		Suite or Apt	
City		State	Postal Code
Primary Phone	Alternate Phone		
Which Boards would	Alternate Phone I you like to apply for? re Committee: Submitted		
Which Boards would	l you like to apply for?	d you prefer?	
Which Boards would	I you like to apply for? re Committee: Submitted , or representational category woul	d you prefer?	
Which Boards would Emergency Medical Ca Which position, seat	I you like to apply for? re Committee: Submitted , or representational category woul	d you prefer?	
Which Boards would Emergency Medical Ca Which position, seat Representative - EMS A Availability to Attendary	I you like to apply for? re Committee: Submitted , or representational category woul	d you prefer?	
Which Boards would Emergency Medical Ca Which position, seat Representative - EMS A Availability to Attenda Night Meetings Day Meetings	I you like to apply for? re Committee: Submitted , or representational category woul	d you prefer?	
Which Boards would Emergency Medical Ca Which position, seat Representative - EMS A	I you like to apply for? re Committee: Submitted , or representational category woul Aircraft Providers I Meetings	d you prefer?	
Which Boards would Emergency Medical Ca Which position, seat Representative - EMS A Availability to Attenda Night Meetings Day Meetings Ukiah Only	I you like to apply for? re Committee: Submitted , or representational category woul Aircraft Providers I Meetings	d you prefer?	

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Interests & Experiences				
Special Expertise, Experience, or Interest in This Area? Current Program Director for REACH Air Medical Services in Mendocino County. Certified Medical Transport Executive. Master's of Business Administration.				
Upload Additional Supporting Documents				
Upload Additional Supporting Documents				
Upload Additional Supporting Documents				

Certification

Please read the following statements and indicate your acceptance thereof.

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.

✓ I Agree *

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