



MENDOCINO COUNTY BOARD OF SUPERVISORS
APPOINTMENT OF INTEREST APPLICATION

REC'D BOARD OF SUPERVISORS
9/24/21 PM 2:27

Committee Name: Community-Based Advisory Redistricting Commission

Date: _____

Representational Category: Committee Member

Name: Javier Chavez

Phone: _____

Address: _____

Address (Mailing): _____

E-mail: _____

Availability to Attend Meetings:

Night Meetings _____

Day Meetings _____

from 10-to 4pm

Ukiah Only _____

Other _____

Gualala via zoom

Special Expertise, Experience, or Interest in This Area:

Working with Latinos

Are you an elected County official? Yes ☐ No ☒

Are you campaign staff for an elected County official? Yes ☐ No ☒

Are you a family member of an elected County official? Yes ☐ No ☒

I hereby certify that I am a resident of the County of Mendocino, and will be at least 18 years of age at the time of the next election. 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 ten years.

Signature: _____

Dated: _____

8-2-21

Return completed application to:
The Mendocino County Executive Office
501 Low Gap Road, Room 1010
Ukiah, CA 95482

or email to: redistricting@mendocinocounty.org