
Profile

Jo
First Name

Bradley
Last Name

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

Joann Bradley

Email Address

Primary Phone

Which Supervisorial district do you live in? *

District 5

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 Written Letter Requesting 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?

Mental Health Treatment Act Citizens Oversight Committee: Eligible

Which specific position, seat, or representational category would you prefer? (Do not enter "Any", etc.)

BHAB

Availability to Attend Meetings

Day Meetings

Availability to Attend Meetings (Other)

As Needed

Interests & Experiences

Special Expertise, Experience, or Interest in This Area?

I am currently the Chair of the Mendocino County BHAB Board and currently sit as that representative on The Oversight Committee. I have attended "The Measure B Board" meetings since it was started. The continuity of my involvement and my deep understanding of our mission is an ongoing asset to The County and Behavioral Health. I also have a family member who uses the system.

[Jo Bradley Resume 2023.doc](#)

Upload a Resume

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 resident in the State of California, County of Mendocino (or reside in another County and meet the qualifications for the position) 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.

I Agree *