



NOTIFICATION TO CLERK OF APPOINTMENT

To: Clerk of the Board's Office: For Appointment from All Board of Supervisors

From: (BCC or District Office): Representing All Districts

Board of Supervisors Meeting Date: _____

Name of Board, Commission, or Committee: Behavioral Health Commission

Representing: All Districts

Name and **WORK** Address of Appointee: Anthony Ivanich, District Administrator for CDCR Adult Parole

Behavioral Health Commission

Phone: **Work** _____

Cell _____

Email Address: Anthony.Ivanich@cdcr.ca.gov _____

Check one:

New Term _____

Reappointment _____

Filling an unexpired term (if checked, list who is being replaced and reason below)

Replacing which member: Chief Brian Ferrante

TERM EXPIRATION DATE: 5/31/22

Maddy Act Regulations:

If applicable, check below regarding the reason for the unexpired term:

Resignation of member _____

Death of member _____

Member did not complete term _____

Other _____

TERM EXPIRATION DATE: 5/31/22

Clerks use: _____ Web updated _____ Maddy Book updated _____ Added to Legistream agenda _____ COI

Form Updated 07-16-15