



**NOTIFICATION TO CLERK OF APPOINTMENT**

To: Clerk of the Board's Office

Date forwarded to Clerk: 9/17/21

From: (In-Home Support Services Advisory Council) Representing District 1

Board of Supervisors Meeting Date: 10/26/2021

Name of Board, Commission, or Committee: In-Home Support Services (IHSS) Advisory Committee

Name and Address of Appointed: Juan Morales\_\_\_\_\_

Check one:

New Term \_\_\_\_\_

Reappointment \_\_\_X\_\_\_

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

Replacing which member:

**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:** \_\_\_\_\_ June 30, 2024 \_\_\_\_\_

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

Form Updated 05-15-13