



NOTIFICATION TO CLERK OF APPOINTMENT

To: Clerk of the Board of Supervisors

From: Supervisor (or Department) **Equal Opportunity Office**

Board of Supervisors Meeting Date: **March 24, 2015**

Name of Board, Commission or Committee: **COMMISSION ON DISABILITIES**

Name Appointee: **Nichole Melvin**
Central California Alliance for Health

Check one:

New Term

Filling Vacancy

Reappointment

Replacing which member:

Maddy Act Regulations:

If applicable, check below regarding the reason for the vacancy:

Resignation of member

Death of member

Member did not complete term

Term of member expired

Other: **Representing: Central California Alliance for Health**

TERM EXPIRATION DATE: **December 31, 2017**

For Clerk to Board use: Web updated Maddy Book updated Added to Legistream agenda