



**NOTIFICATION TO CLERK OF APPOINTMENT**

To: Clerk of the Board's Office: **June 3, 2020**

From: (BCC or District Office): **Supervisor Jane Parker, District 4**

Board of Supervisors Meeting Date: **June 16, 2020**

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

Representing: **District 4**

Name and address of Appointee: **Aaron Wood**

Phone Numbers: Cell:

Email:

Terms Check one:

New Term

Reappointment

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

Replacing which member: \_\_\_\_\_

*NEW TERM EXPIRATION DATE:* **05-31-2023**

**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:* \_\_\_\_\_

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

Form Updated 07-16-15