

APP 18-140



NOTIFICATION TO CLERK OF APPOINTMENT

To: Clerk of the Board's Office

Date forwarded to Clerk: **10/12/2018**

From: (District or Committee):

District 4, Mental Health Commission

Board of Supervisors Meeting Date:

October 23, 2018

Name of Board, Commission, or Committee:

Mental Health Commission – Associate Member

Name of Appointee:

Sydney Johnson

Check one:

New Term

X

Reappointment

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: 12/31/2018

Clerks use: _____ Web updated _____ Maddy Book updated _____ Added to Legistream agenda
Form Updated 10/13/08