



A Tradition of Stewardship
A Commitment to Service

County Executive Office
1195 Third Street, Room 310 Napa, CA 94559-3082
(707) 253-4421 FAX (707) 253-4176
APPLICATION FOR APPOINTMENT TO
BOARD, COMMISSION, COMMITTEE OR TASK FORCE

RECEIVED
APR 07
RECEIVED
eAFA
APR - 8 2014

PLEASE TYPE OR PRINT (Complete pages 1 through 3)

NOTE: Applications are public records that are subject to disclosure under the California Public Records Act. Information provided by the applicant is not regarded as confidential except for the addresses and phone numbers of references and the applicant's personal information including home and work addresses, phone numbers and email address.

COUNTY OF NAPA
EXECUTIVE OFFICE

*Application for Appointment to: (Name of Board, Commission, Committee or Task Force)

Napa County Mental Health Board of Supervisors

*Category of membership for which you are applying:

(This information can be found on the news release announcing the opening.
You may apply for more than one category if more than one position is open.)

Consumer & Patron Council
Community Representative (?)

*Supervisory District in which you reside:

Napa County 5

*Full Name:

Patricia Lynn Ashworth

*Date:

4.7.2014

*Current Occupation: (within the last twelve (12) months)

Semi - Retired Nurse

*Current License: (Professional or Occupational, date of issue and/or expiration including status)

Licensed Vocational Nurse Issue date: 4-30-2001 exp date: 4-30-2014
prev. Emergency Medical Tech Certification License # VN20509

*Education/Experience: (A resume may be attached containing this and any other information that would be helpful to the Board in evaluating your application.)

UC Sullerton: Liberal Arts - Communications 1 yr withstanding
CSU Chico at age 17
GATE of Napa High as Gifted and Talented Youth
Assistant Editor Napa Senior High Journalism Dept. Sophomore
1976-1977

*Community Participation: (Nature of activity and community location)

Soup Kitchen Volunteer with my older Sister as Cook 2 weeks
Napa Valley Food Bank Volunteer 1 Summer 1999 pt. Summer 1998 & 99
Napa News Donation friend and Victim Witness Supporter.
American Medical Association - Future Doctors of America - Daughters
KQED Sponsor - Breast Cancer Walkers & of the American Revolution Contests but
Quality Improvement Committee - Napa County Mental Health
Women Against Drunk Drivers Org. [MADD] Contributors
Rainbow Girls Order of the Eastern Stars Masons of Napa as a teenager

*Application for Appointment to: (Name of Board, Commission, Committee or Task Force)

Napa County Mental Health Board of Napa County

Names, addresses and phone number of three (3) individuals familiar with your background:

*Name:

I Mrs. Yvonne Steffek R.N.

*Address:

[Redacted]

*City:

Napa

*State:

CA

*Zip Code:

94559

*Telephone:

[Redacted]

*Name:

II Mrs. Alexa Fouche LC8M

*Address:

Napa, California

*City:

Napa

*State:

CA

*Zip Code:

94558

*Telephone:

work:

[Redacted]

*Name:

III Mrs. Daci Strauss

Mrs. Karen Sue Ashworth P.T.
(Sister)

*Address:

[Redacted]

*City:

Napa

*State:

CA

*Zip Code:

94559

*Telephone:

Woodland

CA

92704

[Redacted]

IV City Supervisor Elect.

Mr. Vincent Ferneale

(High School Biology Teacher)

The platform campaign for his
first term by passing out
flyer door to door for his first term
(as a young woman.) (in pre-nursing school)

He may remember me.

Name and occupation of spouse within the last 12 months, if married (For Conflict of Interest purposes):

Never married.

*Please explain your reasons for wishing to serve and, in your opinion, how you feel you could contribute:

As a valuable member of the Mental Health Community, I wish to use my Communication skills and personal knowledge to better the use of great services Napa County has to offer the mental health patients and their families, to reach all financial and educational and types of clients from migrant worker to corporate household within our colorful community of Napa County. In using my professional 29 year career in Nursing I can better serve the community at this time as I am in school and not working.

APPLICATION FOR APPOINTMENT TO BOARDS, COMMISSIONS, COMMITTEES, OR TASK FORCE

Page 3

*Application for Appointment to: (Name of Board, Commission, Committee or Task Force)

Napa County Board of Supervisors e.g. Napa County

APPLICANTS APPOINTED BY THE BOARD OF SUPERVISORS WILL BE REQUIRED TO TAKE AN OATH OF OFFICE.

PLEASE NOTE THAT APPOINTEES MAY BE REQUIRED BY STATE LAW AND COUNTY CONFLICT OF INTEREST CODE TO FILE FINANCIAL DISCLOSURE STATEMENTS.

All applications will be kept on file for one year from the date of application.

PERSONAL INFORMATION

The following information is provided in confidence, but may be used by the Board of Supervisors when making the appointment, or be used by the Committee/Commission/Board/Task Force following appointment for purposes of communicating with the appointee.

*Full Name:

Patsie Lynn "Cherry" Ashworth/Book

*email Address:

[REDACTED]

*Home Address:

[REDACTED]

*Work Address:

none - semi-retired

*City:

Napa

*State:

CA

*Zip Code:

94559

*City:

Napa

*State:

CA

*Zip Code:

94559

*Telephone:

[REDACTED]

*Telephone:

[REDACTED]