A Tradition of Stewardship A Commitment to Service

August 29, 2019

County Executive Office

1195 Third Street, Sulte 310 Neos. CA 94559 www.countyofnapa.org

> Main: (707) 263-4421 Fax: (707) 253-4176

Minh C. Tran County Executive Officer

Naomi Dreskin-Anderson

Napa, CA 94558

Re: Napa County Commission on Aging

Dear Ms. Dreskin-Anderson:

You have been a valued member of the Napa County Commission on Aging representing District 2. The term of your position will expire September 30, 2019. If you wish to request reappointment for another 2-year term, please check the following box:

Yes, I would like my name, this letter and application forwarded to the Board of Supervisors for possible reappointment to the Napa County Commission on Aging for the term commencing immediately and expiring September 30, 2021.

If you have chosen to request reappointment, please check one of the two boxes below regarding your last application.

I confirm that all the information on my last application is current.

Some of the information on my last application is no longer current or is five (5) years old or older. I will submit a new or revised application. (Submitted 9/6/19

(To complete a new application form either contact the Napa County Executive Office or go to the following link to complete your application online:

https://www.countyofnapa.org/1420/Committees-Commissions

After checking the appropriate box, sign and date on the lines below and return this letter to the County-Executive Office by mail, email, or fax.

51GNATURE

COUNTY EXECUTIVE OFFICE 1195 Third Street • Suite 310 • Napa, CA 94559 • (707) 253-4421

www.countyofnapa.org FAX (707) 253-4176

## Print

Application for Appointment to Board,	Commission,	Committee,	Task Force	or Position -
Submission #1065				

Date Submitted: 9/6/2019

Applicants appointed by the Board of Supervisors will be required to take an oath of office. All applications will be kept on file for one year from the date of application.

**Public Records Act** 

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.

Form 700 Conflict of Interest Code

California Fair Political Practices Website

Please note that appointees may be required by state law and county conflict of interest code to file financial disclosure statements.

## Application for Appointment to:

Commission on Aging

Name of Board, Commission, Committee, Task Force or Position.

Category of Membership for Which You Are Applying\*

District 2

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.

## **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*	Supervisorial District i	Supervisorial District in Which You Reside*	
Naomi Dreskin-Anderson	2		
Home Address*			
City*	State*	Zip*	
Napa	California	94558	
Phone*	Email Address*		
		•	
Work Address*			
City*	State*	Zip*	
Napa	California	94559	
Work Phone*			
Current Occupation*			
Elder Law Attorney			

Within the last 12 months

Current License
California State Bar sworn in 6/9/2000
Professional or occupational, date of issue, and expiration including status
Education/Experience
B.A. Communications; J.D. Private law practice serving elders and their families.
Resume Browse
Attach a resume containing this and any other information that would be helpful to the Board in evaluating your application.
Community Participation
Commission on Aging since 2003 serving three terms as Chair; HAPI, serving as Co-Chair for past four years; Retirement Renewal Forums Advisory Committee bringing educational programs to the older adult community.
Nature of activity and community location
Other County Board/Commission/Committee on Which You Serve/Have Served
Elder Abuse Planning and Prevention Council; Financial Abuse Specialist Team
Public Actions that may impact Credit Rating
N/A
List all court or other public administration actions impacting your credit rating within the past ten (10) years.
Provide names, addresses and phone numbers of 3 individuals who are familiar with your background.
Reference 1
Name* Phone*
Heather Stanton

ty*	State*	Zip*	
ара	CA	94559	
eference 2			
ame*	Phone*		
etty Rhodes			
ldress*			
ty*	State*	Zip*	
ара	CA	94558	
······································	••••••	••••••	••••••
eference 3			
ame*	Phone*		
uzanne Shiff			
ldress*			

City*	State*	Zip*
Napa	California	94558
Name and occupation of spouse within the last 12 mon	ths, if married.	
For Conflict of Interest purposes		
Please explain your reasons for wishing to serve and, in		
I would appreciate the opportunity to continue with the	he important work of the Comm	ission. I am currently serving as Vice Cha
Responded		
Yes		
Completed		
Yes		
I declare under penalty of perjury that the foregoing	is	
true and correct.*  ✓ Yes		
No		
Electronic Signature Agreement		
By checking the "I agree" box below, you agree and of a traditional paper document, 2) by signing in this valid and binding upon you to the same force and exprovide a traditional signature at a later date.	alternate manner, you authoriz	ze your electronic signature to be
Electronic Signature		Date
Naomi R. Dreskin-Anderson		9/6/2019 hh:mm am/p