



A Tradition of Stewardship
A Commitment to Service

County Executive Office

1195 Third Street, Suite 310
Napa, CA 94559
www.countyofnapa.org

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

Nancy Watt
County Executive Officer

November 25, 2014

Lynn Light

Napa CA 94508

Re: Napa County Advisory Board on Alcohol and Drug Program

Dear Ms. Light:

The term of your position on the Napa County Advisory Board on Alcohol and Drug Program expires on January 1, 2015.

If you wish to request reappointment, please check the boxes below, sign where indicated, and return this letter to the County Executive Office. When the letter has been returned, your name will be forwarded to the Board of Supervisors for consideration for reappointment to another three-year term as you have been a valued member of the Napa County Advisory Board on Alcohol and Drug Program.

If any of the information on your last application for appointment has changed or is 5 years or older please contact the Napa County Executive's Office to obtain a new application, and submit the completed new application when returning this letter.

Yes, I would like my name, this letter and application forwarded to the Board of Supervisors for possible reappointment to the Napa County Advisory Board on Alcohol and Drug Program for the term commencing immediately and expiring January 1, 2018.

I confirm by signing below that all the information on my application is current; or

Some of the information on my prior application is no longer correct. A new application is attached.

SIGNATURE

1-15-15
DATE



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

MAR 28 2014 eAFA

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COUNTY OF NAPA
 EXECUTIVE OFFICE

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.

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

Advisory Board on Alcohol and Drug Programs

*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.)

Interested citizen

*Supervisorial District in which you reside:

5

*Full Name:

Lynn Light

*Date:

3/28/2014

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

Marketing Communications/Video Producer

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

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

Cal State Hayward - Bachelors

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

*Other County Board/Commission/Committee on which you serve/have served:

Alano Center of Napa Valley - Board of Directors
 IHSS Advisory Committee

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

Advisory Board on Alcohol and Drug Programs

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

*Name:

Denise Gale

*Name:

Catherine Shackford

*Address:

[Redacted Address]

*Address:

[Redacted Address]

*City: *State: *Zip Code:

Napa CA 94558

*City: *State: *Zip Code:

Napa CA 94558

*Telephone:

[Redacted Telephone]

*Telephone:

[Redacted Telephone]

*Name:

Bill Jovich

*Address:

[Redacted Address]

*City: *State: *Zip Code:

Napa CA 94558

*Telephone:

[Redacted Telephone]

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

Clayton Light, video producer/motion graphics editor

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

to better interface and exchange ideas between the ~~Alano Center~~ ^{NRC Napa Recovery Resource Center} Board of Directors for the Recovery Community and Napa County Programs.
Napa
incorporated as a 501c3 under Alano Club.

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

Advisory Board on Alcohol and Drug Programs

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:

Lynn Light

*email Address:

[REDACTED]

*Home Address:

[REDACTED]

*Work Address:

[REDACTED]

*City:

Napa

*State:

CA

*Zip Code:

94558

*City:

Napa

*State:

CA

*Zip Code:

94581

*Telephone:

[REDACTED]

*Telephone:

[REDACTED]