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County Executive Office  
1195 Third Street, Room 310  
Napa, CA 94559-3082  
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NOV 17 2014

eAFA

COUNTY OF NAPA  
EXECUTIVE OFFICE

APPLICATION FOR APPOINTMENT TO  
BOARD, COMMISSION, COMMITTEE OR TASK FORCE

PLEASE TYPE OR PRINT (Complete pages 1 through 3)

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

Tobacco Advisory Board

\*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.)

member

\*Supervisorial District in which you reside:

five 4

\*Full Name

Donald Neal Hitchcock

Date

11/14/14

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

Physician Advisor, Community Outreach Dept,  
Queen of the Valley Medical Center

Current License (Professional or Occupational); Date of issue and/or expiration including status:

Medical Doctor exp. Nov. 30, 2015

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

MD degree UC Davis 6/71  
Solo Family Medicine 25 years  
Physician Advisor Community Outreach 11 years  
Medical Director, Clinical Information Dept,  
CVMC

Community participation (nature of activity and community location):

Member Healthy Aging Population Initiative  
Stony Falls Napa County  
Napa County Asthma Coalition

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

[Empty box for other county board/committee information]

\* Denotes Mandatory Entry Required

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

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

Tobacco Addiction Board

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

\*Name

Randolph Snowden

\*Name

Yeggy Klick (CAW)

\*Address

[REDACTED]

\*Address

[REDACTED]

\*City

Napa

\*State \*Zip Code

CA 94558

\*City

Napa

\*State \*Zip Code

CA 94558

\*Telephone

[REDACTED]

\*Telephone

[REDACTED]

\*Name

Dana Codrion

\*Address

[REDACTED]

\*City

Napa

\*State \*Zip Code

CA 94558

\*Telephone

[REDACTED]

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

Patricia Hitchcock, office manager, Surfer Math

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

I am supporting CAW on their new Tobacco Cessation Education program to provide services to inpatients at Queen of the Valley. Working with the Live Healthy Napa County program - member of Community Health Committee for Napa County Medical Society. vast experience with health consequences of tobacco.

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Tobacco Advisory Board

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 to the extent that it will not be posted on the internet, 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

Ronald Neal Hitchcock

\*e-mail Address

[REDACTED]

\*Home Address

[REDACTED]

\*Work Address

[REDACTED]

\*City

Wapen

State

CA

\*Zip Code

94558

\*City

Wapen

State

CA

Zip Code

94558

\*Telephone

[REDACTED]

Telephone

[REDACTED]

[REDACTED]