

SNOHOMISH COUNTY BOARDS & COMMISSIONS NOMINATION FORM
INITIATOR: Please fill in this section
County department/agency: Frecutive
Contact person/phone: Karen Anderson
Name of Board/Commission: Snuhomish Cooyd Law & Justice Cooncil.
Advisory Governing Ad Hoc Ongoing
Term of Appointment Commencing
Mandated Requirements for Appointment*
SNOHOMISH COUNTY BOARDS & COMMISSIONS APPLICATION FORM
NOMINEE: Please fill in this section
Name of Board/Commission: 5nuh anysh County Regional Lawa Justice Solar
New appointment: Reappointment: 1st 2nd Ex-Officio
Snohomish County Council District (Please choose one):
Name: Marie C Juhie 5 Don't Know
Home Address:
City: Mary 301/18 State: WA Zip: 98270
Mailing Address (if different):
Telephone (home): (work)
E-mail:
Current Employer:
Occupation:
Education: 2 Jean RN degree
Licenses held (if applicable):
Why would you like to serve on this board/commission? I have been on many
Mental Health Atental Advisory Board Chair North Sound Mental Health Advisory Board Chair
1/12 of 190 tox Board
Council on aging
Council on aging Vail Citizens Advisory Group ADA Public Right-of-Way Advisory Committee (cont)



By signing this Application Form, Nominee acknowledges that he/she will comply with all county policies, county code, and state law. Nominee also acknowledges that any record, including personal e-mail, prepared, owned, used, or retained by Nominee in the conduct of Board/Commission business is a public record, and Nominee agrees to produce said records to County upon request. Failure to comply with the above provisions may result in Nominee's removal from Board/Commission.

Please attach resume if available and return to:

Dave Somers, County Executive Snohomish County Executive Office 3000 Rockefeller Ave., MS 407 Everett, WA 98201-4046

(425) 388-3699 phone (425) 388-3434 fax county.executive@snoco.org

I am a 15 yo woman with Bipolour Disorder & SUDStance use disorder. I tuke meds & see therapists. These volunteer activities are good