



Snohomish County Council

Legislation Text

File #: 2024-0579, Version: 1

Executive/Council Action Form (ECAF)

ITEM TITLE:

Motion 24-168, confirming the appointment of Heidi Jellerson to the Snohomish County Council on Aging

DEPARTMENT: Human Services

ORIGINATOR: Linda Vizmanos

EXECUTIVE RECOMMENDATION: Lacey Harper 4/10/24

PURPOSE:

To recommend the appointment of Heidi Jellerson to the Snohomish County Council on Aging.

BACKGROUND: The Snohomish County Council on Aging exists to advise, assist, and advocate for older persons and those adults with disabilities in Snohomish County by keeping the County Executive and other elected officials apprised of the concerns and needs of the older populations; and assisting and guiding the work of the Long Term Care and Aging group in fulfilling its stated missions, supporting ongoing evaluation of program services, and policy involved in the implementation of the Snohomish County Area Plan on Aging.

In addition to working full time, Heidi Jellerson has volunteered, participated in, and lead 15 international humanitarian trips. Locally she as volunteered at animal shelters, food pantries, and through her church. Ms. Jellerson is also a mentor and leader in her profession and heads many groups to improve processes and situations.

Ms. Jellerson does not serve on any other county boards or commissions.

FISCAL IMPLICATIONS:

| EXPEND: FUND, AGY, ORG, ACTY, OBJ, AU | CURRENT YR | 2ND YR | 1ST 6 YRS |
|---------------------------------------|------------|--------|-----------|
| | | | |
| | | | |
| | | | |
| | | | |
| TOTAL | | | |

| REVENUE: FUND, AGY, ORG, REV, SOURCE | CURRENT YR | 2ND YR | 1ST 6 YRS |
|--------------------------------------|------------|--------|-----------|
| | | | |
| | | | |
| | | | |
| | | | |
| TOTAL | | | |

DEPARTMENT FISCAL IMPACT NOTES: N/A

CONTRACT INFORMATION:

| | | | | | |
|-----------|-------|-----------|-------|--------|-------|
| ORIGINAL | _____ | CONTRACT# | _____ | AMOUNT | _____ |
| AMENDMENT | _____ | CONTRACT# | _____ | AMOUNT | _____ |

Contract Period

| | | | | |
|-----------|-------|-------|-----|-------|
| ORIGINAL | START | _____ | END | _____ |
| AMENDMENT | START | _____ | END | _____ |

OTHER DEPARTMENTAL REVIEW/COMMENTS: Reviewed/approved by: Finance (Nathan Kennedy 4/9/24)