# Board Appointment Application

Salinas Valley Memorial Healthcare System is accepting applications to fill a vacancy on the Board of Directors of the District. This position fills the unexpired term of the previous incumbent until December 4, 2020. This appointee will have the option of running for a two-year term in the November 3, 2020 election.

REQUIREMENTS: The appointee must be a registered voter in the Salinas Valley Memorial Healthcare System District and resident of [Zone 5](https://www.montereycountyelections.us/files/mced/data_public_maps/by_election/2014-11-04/Maps/SVMHS_2014_08_01_rev_Precincts_2014_Nov_4_Election.pdf). Applications will be accepted until noon on Friday, June 19, 2020.

The Board of Directors intends to make the appointment on June 24, 2020 at 5:00pm. Please mail the completed application to the Office of District Counsel, Ottone Leach & Ray LLP, 1418 South Main Street, Suite 203, Salinas CA 93908; or submit the completed application in person at the address above; or submit a PDF file of the completed application to gary.ray@olrlawfirm.com.

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Alternate Phone: |  |
| Email: |  | Date of Birth: |  |

Please provide information on your relevant background below, or alternatively, attach background information with this application.

## Relevant Background

I certify that my answers are true and complete to the best of my knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |