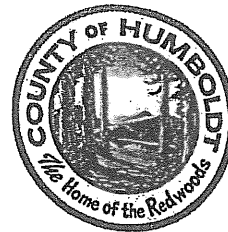




County of Humboldt  
In Home Supportive Services  
Advisory Committee  
Eureka, CA 95501



## APPLICATION/NOMINATION FORM

DATE:

1/13/2023

APPLICANT/NOMINEE:

Claudia Cranford

MAILING ADDRESS:

[REDACTED]

PHYSICAL ADDRESS:

same

TELEPHONE (Home):

[REDACTED]

(Cell)

COMPUTER ACCESS: ☐ Yes ☐ No

E-MAIL ADDRESS:

[REDACTED]

computer access is temporaryRECIPIENT ☐PROVIDER ☐FAMILY MEMBER ☐☒ OTHER:Friend of recipient & provider

ORGANIZATION MEMBERSHIP(S):

Past President Eureka Woman's Club; Past Secretary of United States Navy League.

WHY ARE YOU INTERESTED IN JOINING THIS COMMITTEE?

Friends havetold me and sounds useful

TELL US A LITTLE BIT ABOUT YOURSELF:

Retired Registered Nurse. Worked for 6 1/2 years at Visiting Angels. I need to be useful.

REFERENCES: Name, Phone Number &amp; Relationship to Applicant

1. Andrew BuschKamp Friend [REDACTED]2. Susan Tatro Friend [REDACTED]

Applicants selected for appointment will be required to file Form 700, Statement of Economic Interest whatever that is, I have no economic interest.

Return completed form to: IHSS Advisory Committee c/o IHSS Public Authority

605 K Street

Eureka, CA 95501