

CLINTON J. OLIVIER Council Member, Seventh District

NOTIFICATION OF APPOINTMENT

TO BOARD OR COMMISSION

TO:

City Council

THROUGH:

Yvonne Spence, City Clerk

By:

Council Member Olivier

Reappointment -

X

New Appointment

Name of person replaced: Nancy Ellis

Name:

Susan L. Smith

Address:

3705 N Anna

Fresno, California 93726

Business Phone:

N/A

Home Phone:

(559) 240-3717

Appointed to:

Bicycle/Pedestrian Advisory Committee

Term:

Continuous

* * COMMUNICATION RESULT REPORT (JAN. 26. 2015 7:03PM) * * *

FAX HEADER 15 HEALTH INF MGT

TRANSMITTED/STORED : JAN. 26. 2015 7:02PM

FILE MODE

OPTION

ADDRESS

RESULT

PAGE

1400 MEMORY TX

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2/2

REASON FOR FRROK E 1) HANG UP OR LINE FAIL E D) NO ANSWER

E 2) BUSY E 4) NO PACSIMILE CONNECTION



Fax Cover Letter

Date:	1-26-15	_ Time:	1910	Number of Pag	es:
Please De	liver To:				
Name:		City	Clerk's C	office_	
Dept:					
FAX #:			488-1005		
PHONE	: #:				
	Health Info	ormation	Manageme	ent Departn	nent
Phone #: Fax #:	Community Regional Medical Center (559) 459-3925 (559) 459-2412		Clovis Community Medical Center (559) 324-4066 (559) 324-3708		Community Behavioral Health (559) 459-3925 (559) 459-2412
Sender's I	Name	Susan S	mith		**************************************
Comment	- Board	,		lication to edestrian A	
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by anyone of error, please	ALTY NOTICE: The interpretation of the addressed only. District that the addressed notify us immediately ryour cooperation.	nformation con ssemination, dis e or addressee	stained in this fact stribution or copying is agent is probibit	simile transmission g of the information	is confidential and in this transmission

<sup>Community Regional Medical Center / (559) 459-6000
Clovis Community Medical Center / (559) 323-4000
Community Medical Center - Oakhurst / (559) 683-2992
Community Health Center - Sierra / (559) 459-6000
Community Behavioral Health Center / (559) 449-8000</sup>

<sup>Community Outpatient Rehab Center / (559) 459-1842
California Cancer Center / (559) 447-4050
Deran Koligian Ambulatory Care Center / (559) 459-4900
Fresno Heart & Surgical Center / (559) 433-8000</sup>

[♠] Community Sub Acute Transitional Care Center / (559) 459-1711

APPLICATION FOR APPOINTMENT TO BOARD OR COMMISSION

Resume or letters of recommendation may be attached.
Applicants may be required to live within the Fresno City limits. I reside in Council District No.
e: Susan L. Smith Hm. Phone: 222-2775 Wk. Phone: 240-371
3705 N Anna Fresho, CA Zip: 93726
Address: CRMC-Clovis 2755 Herndon Ave. Clovis, CA Zip: 93611
ail: Dosusmithe gmail Occupation/Employer: Retired Per Diem Now Yrs 23 Month
ational Background, Schools Attended, Degrees and Certifications:
Graduated Fresno High School 1975
Graduated CSUFresno 1981 BS History
ssional and Community Affiliations:
Fresno Cycling Club, Fresno County Bicycle Coalition what Board or Commission are you applying? Bicycle Pedestrian Advisory Committee Di
ly explain why you are interested in serving on this Board(s) or Commission(s):
am committed to making our city a safe environment for eople to travel safely in while walking, biking or driving.
Pople 10 If aver supers 111 to
de 3 Personal/Professional References. Provide name, address, and phone number where they may be reached during the day
Bill and Louise Hefele neighbor Dist. 7 3716 N. Anna Fresno, CA 93726 229-1
Randall Isogawa 8174 N. Dearing Fresno, CA 93720 291-8692
Randall Isogawa 8174 N. Dearing Fresno, CA 93720 297-8692 Linda Lyons, Manager 2755 Herndon Avenue Clovis 93611 459-6000 ext. 56
ou or an immediate family member have any professional or financial relationships that may present a potential conflicts for this board, commission or similar body?
are under penalty of perjury the above information is true and correct.
1: 1-26-15 Applicant: Susant Smith Signature

n completed, signed application to the City Clerk's Office, 2600 Fresno Street, Room 2133, Fresno, CA 93721-3603 or FA 488-1005. Your application will be kept on file for two years, please re-file after that time if you are still interested in servin