

Brenda Lyerly
Chair of the Board

Johnny Riddle
Vice-Chair



Chris Jones
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Valerie Jaynes
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468 New Market Blvd.
Boone, NC 28607

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Voice: 800-735-8262

Phone: 828-265-5434
Fax: 828-265-5439

December 11, 2018

Ann Clark
Clerk to the Board
150 Government Circle
Suite 2500
Jefferson, North Carolina 28640

Dear Ms. Clark:

The term of appointment of Ms. Cheryl Lanning to the Ashe County Joint Community Advisory Committee will expire January 4th, 2019. She has indicated her desire to be reappointed for an additional three-year term.

Please submit Ms. Lanning's name to the Commissioners for their consideration and let me know their decision at your earliest convenience. The request for renomination is attached.

Sincerely,

Stevie John
Regional Long Term Care Ombudsman



County of Ashe
150 Government Circle,
Suite 2500
Jefferson NC 28640
Phone (336) 846-5501
Fax (336) 846-5516

**APPLICATION FOR NOMINATION
FOR APPOINTMENT TO:**

CAC MEMBER
Board, Commission, or Committee

DATE: 12-4-2018

NAME: CHERYL LANNING PHONE: 336-982-2040

ADDRESS: 4357 CRANBERRY CREEK ROAD
LAUREL SPRINGS, NC 28644

BUSINESS ADDRESS: N/A PHONE: _____

COUNTY BOARDS OR COMMITTEES PRESENTLY SERVING ON:

CAC MEMBER

BUSINESS AND CIVIC EXPERIENCE:

PLEASE STATE REASON WHY YOU WOULD LIKE TO SERVE ON THIS

BOARD/COMMITTEE: I HAVE BEEN SERVING AS A MEMBER FOR 4 YEARS
NOW AND WOULD LIKE TO CONTINUE

For the purpose of diversity and balance on Ashe County's boards and committees, please complete the following:

Race W Sex F I am a resident of the City/Town of LAUREL SPRINGS

I have been a resident of Ashe County for 16 years.

Return this form to:
Clerk to the Board of Commissioners
150 Government Circle, Suite 2500
Jefferson, North Carolina 28640
Phone (336) 846-5501 Fax (336) 846-5516

Cheryl Lanning
Signature of Applicant

I understand that this application will be
kept on active file for one year only.

RENOMINATION FORM

LONG TERM CARE COMMUNITY ADVISORY COMMITTEE

Nominee Background Information

Name CHEYL LANNING

Home Address 4357 CRANBERRY CK. RD Phone(H) 336-982-2040

LAUREL SPRING, NC Zip Code 28644

Business Address N/A Phone (W) _____

Zip Code _____

Email Address cherylanning@sky best.com

Occupation RETIRED

Number of hours available per month for this position 64

Education HIGH SCHOOL

Business and civic experience and skills RETIRED FROM DUKE ENERGY,

ADMINISTRATIVE, CHURCH TREASURER, BIBLE STUDY TEACHER,
VOLUNTEER IN ACTIVITIES DEPARTMENT AT MARGATE HEALTH &
Areas of expertise and interest/skills CROCHETING, GOOD ORGANIZATIONAL REHAB

SKILLS, BIBLE STUDIES,

THE FOLLOWING PERSONS ARE EXCLUDED BY LEGISLATION FROM SERVING ON THE COMMITTEE:

1. Persons or immediate family member of persons with a financial interest in a home served by a committee.
2. An employee or governing board member or immediate family member of an employee or governing board member of a home served by a committee. (A person paid by a home as a consultant is considered an employee).
3. The immediate family member of a patient in a home served by a committee. An "immediate family member" is defined as mother, father, sister, brother, spouse, child, grandmother, grandfather, and in-laws for the above.

I CERTIFY THAT NONE OF THE EXCLUSIONS LISTED ABOVE APPLY TO ME. I UNDERSTAND THAT I MUST NOTIFY THE OMBUDSMAN IMMEDIATELY IF MY SITUATION CHANGES WITH RESPECT TO THE ABOVE EXCLUSIONS.

Cheryl Lanning Date 12-4-2018
Signature of Applicant

Nomination form submitted by Steve Gilman Name