Advisory Group Application

Step 1

Application for Appointment to Whatcom County Advisory Groups

Public Statement

THIS IS A PUBLIC DOCUMENT: As a candidate for a public advisory group, the information provided will be available to the County Council, County Executive, and the public. All advisory group members are expected to be fair, impartial, and respectful of the public, County staff, and each other. Failure to abide by these expectations may result in revocation of appointment and removal from the appointive position.

Title	Mr.
First Name	Lucas
Last Name	Plagerman
Today's Date	1/6/2025
Street Address	
City	
Zip	
Do you live in Whatcom County?	Yes
Do you have a different mailing address?	Field not completed.
Primary Telephone	
Secondary Telephone	Field not completed.
Email Address	
Step 2	
1. Name of Advisory	Drainage District #3

Group

2. Do you meet the residency, employment, and/or affiliation requirements of the position for which you're applying?	Yes
3. Which Council district do you live in?	District 3
4. Have you ever been a member of this Advisory Group	Νο
5. Do you or your spouse have a financial interest in or are you an employee or officer of any business or agency that does business with Whatcom County?	Yes
lf yes, please explain	I am Employed by CHS Northwest in Lynden Washington
6. Have you declared candidacy (as defined by RCW 42.17A.055) for a paid elected office in any jurisdiction within the county?	No
You may attach a resume or detailed summary of experience, qualifications, & interest in response to the following questions	Field not completed.
7. Please describe your occupation (or former occupation if retired), qualifications, professional and/or community activities, and education	I am a crop advisor at CHS Northwest and have my associates degree in Agriculture

8. Please describe why you're interested in serving on this Advisory Group.	My Wife and I own 45 acres that 4 mile creek runs through
References (please include daytime telephone number):	Leighton Overson (Agronomy Manager at CHS Northwest) 360- 815-4705
Appointment Requirements	l understand and agree
Signature of applicant:	Lucas Plagerman
Place Signed / Submitted	
	(Section Break)