

RESOLUTION # _____

**RESOLUTION APPOINTING CHEYENNE-LARAMIE COUNTY BOARD OF
HEALTH MEMBER**

BE IT RESOLVED by the governing body of Laramie County, Wyoming,
_____ shall be and is hereby appointed as a member of the Cheyenne-Laramie
County Board of Health to perform the duties of said Board according to law for a five-year term
starting January 1, 2025 ending December 31, 2029.

PRESENTED, READ AND ADOPTED this ____ day of _____, 2024.

BOARD OF LARAMIE COUNTY COMMISSIONERS

Chairman

ATTEST:

Debra Lee, Laramie County Clerk

Reviewed and approved as to form:

Laramie County Attorney's Office

OATH OF APPOINTMENT

THE UNDERSIGNED does solemnly swear (or affirm) to honor and sustain the
constitution of the United States, the constitution of the State of Wyoming, and to faithfully,
honestly and impartially discharge all duties as a member of the Cheyenne-Laramie County Board
of Health.

CHEYENNE-LARAMIE COUNTY BOARD OF
HEALTH MEMBER

Signature

Date

Witness

Date

Jessica Bennetts

From: Sue Hume <suepnp@gmail.com>
Sent: Tuesday, September 24, 2024 1:10 PM
To: Jessica Bennetts
Subject: Board of Health

Attention: This email message is from an external(non-County) email address. Please exercise caution and/or verify authenticity before opening the email/attachments/links from an email you aren't expecting.

Dear Jessica, this is to confirm my willingness to serve on the CLCHD Board of Health for a second 5-year term. Thank you. Sue Hume Sent from my iPhone