

RESOLUTION # \_\_\_\_\_

**“RESOLUTION APPOINTING A MEMBER TO THE LARAMIE COUNTY  
COMMUNITY JUVENILE SERVICES JOINT POWERS BOARD”**

**BE IT RESOLVED** by the governing body of Laramie County, Wyoming, that Zack Johnson, shall be and is hereby appointed as a member of the Laramie County Community Juvenile Services Joint Powers Board; to serve as the designated representative of Laramie County to the Board; to perform the duties of said Board according to law; and to complete the three year term left vacant by Robert Peete ending June 30, 2027.

**PRESENTED, READ AND ADOPTED** the \_\_\_\_ day of \_\_\_\_\_, 2026.

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 Laramie County Community Juvenile Services Joint Powers Board.

LARAMIE COUNTY COMMUNITY JUVENILE  
SERVICES JOINT POWERS BOARD

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

# APPOINTMENT APPLICATION

Board/committee/commission: Laramie County Community Juvenile Services Joint Powers Board

Name: ZACH JOHNSON

Preferred Name: ZACH

Mailing Address: 415 W. 18 STREET  
CHEYENNE, WY 82009

Home Address: 11200 YELLOW BEAR ROAD  
CHEYENNE, WY 82009

Phone: 307-631-0180

Spouse: \_\_\_\_\_

Occupation: CHEYENNE POLICE SRO SERGEANT Self-Employed? NO

Employer/Name of business: CHEYENNE POLICE DEPARTMENT

Address / Zip: 415 WEST 18 STREET

Phone: 307-637-6502

Year Employed: 2006 Years of Laramie County Residency: 19

Fax: \_\_\_\_\_ Email: ZJOHNSON@CHEYENNEPD.ORG

Cell: 307-631-0180

Education/Degrees: \_\_\_\_\_

Other community memberships: \_\_\_\_\_

Please explain your interest in serving on this Board/Committee/Commission (attach additional pages if needed):

I AM ASSIGNED TO THE DIRECT SUPERVISOR POSITION FOR THE CHEYENNE POLICE  
DEPARTMENT'S SCHOOL RESOURCE OFFICERS.

Signature: 

Date: 01/05/26

Please return to:

Laramie County Commissioner's Office  
310 W 19<sup>th</sup> St, Room 300  
Cheyenne, WY 82001  
Fax: 307-633-4267  
Email: commissioners@laramiecounty.com  
Phone: 307-633-4260

=====For Office use Only=====

New Appointment: \_\_\_\_\_ or Reappointment: \_\_\_\_\_ Term Length: \_\_\_\_\_ Year(s)

Full Term: \_\_\_\_\_ or Unexpired Term: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Comments: \_\_\_\_\_