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A Tradition of Stewardship A Commitment to Service

**Napa County Mental Health Board**

2261 Elm Street Building N Napa, CA 94559-3721 [www.countyofnapa.org](http://www.countyofnapa.org)

Main: (707) 299-2101 Fax: (707) 299-2199

Date:

To: Napa County Mental Health Board Chair and members Subject: Resignation

I would like to inform you that I am resigning from my position as *(indicate: family member of consumer,*

*consumer, concerned citizen) ),* member of the Napa County Mental Health

Board as of: (date).

Thank you for the opportunity to participate on the Mental Health Board. Sincerely,