

AGENDA

BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS SPECIAL NOMINATION COMMITTEE MEETING

Thursday, March 6, 2025 at 4:00 pm

Room 225, Behavioral Health Center, 201 Mulholland Street, Bay City, MI 48708

	Committee Members:	Present	Excused	Absent	Committee Members:	Present	Excused	Absent	Others Present: BABH: Chris Pinter and Sara McRae Legend: M-Motion; S-Support; MA-Motion Adopted; AB-Abstained
	Tim Banaszak	_____	_____	_____	Pat McFarland	_____	_____	_____	
	Jerome Crete	_____	_____	_____	Sally Mrozinski	_____	_____	_____	
	Christopher Girard	_____	_____	_____					

	Agenda Item	Discussion	Motion/Action
1.	Call To Order & Roll Call		
2.	Public Input (Maximum of 3 Minutes)		
3.	Nomination & Elections 3.1) Committee Chair 3.2) Committee Vice Chair		3.1) Consideration of nomination to elect _____ as Committee Chair 3.2) Consideration of nomination to elect _____ as Committee Vice Chair
4.	Unfinished Business 4.1) None		
5.	New Business 5.1) Update of the BABH Board of Directors appointments by the Arenac County Commission 5.2) Review of applicants in accordance with the Mental Health Code for four (4) BABH Board of Directors appointments by the Bay County Commission		5.1) No action necessary 5.2) Consideration of a motion to forward the letter verifying Mental Health Code requirements of the applicants to the Bay County Commission

AGENDA

BAY ARENAC BEHAVIORAL HEALTH
BOARD OF DIRECTORS
NOMINATION COMMITTEE MEETING

Thursday, March 6, 2025 at 4:00 pm
Room 225, Behavioral Health Center, 201 Mulholland Street, Bay City, MI 48708

Page 2 of 2

	5.3) Schedule next meeting for purposes of 2025 Board Officers recommendations		5.3) No action necessary
6.	Adjournment	M -	S - pm MA

The Arenac County Board of Commissioners made appointments to the BABH Board at their February 11, 2025 Commission meeting.

The Bay County Board of Commissioners are scheduled to make appointments to the BABH Board at their March 18, 2025 Commission meeting.



BAY COUNTY BOARD OF COMMISSIONERS

515 Center Avenue, Suite 405, Bay City, MI 48708-5125

Tel: (989) 895-4136 | Fax: (989) 895-4226

TIM BANASZAK
CHAIRMAN
2ND DISTRICT

Chris Pinter
Chief Executive Officer
Bay-Arenac Behavioral Health Authority
201 Mulholland
Bay City, MI 48708

VAUGHN J. BEGICK
VICE CHAIRMAN
3RD DISTRICT

Dear Mr. Pinter,

CHRISTOPHER T. RUPP
SERGEANT AT ARMS
5TH DISTRICT

Please be advised that the Bay County Board of Commissioners has received six (6) applications for appointment to the Bay-Arenac Behavioral Health Authority. These include three (3) appointments for full three-year terms commencing April 1, 2025, and expiring March 31, 2028, as well as one (1) appointment to fill an unexpired term ending March 31, 2026.

KATHY NIEMIEC
1ST DISTRICT

The applicants for consideration are as follows:

- **Christopher Girard** (Incumbent)
- **Robert J. Pawlak** (Incumbent)
- **Richard Byrne** (Incumbent)
- **Shelley King**
- **Sandy Shutt**
- **Justin Peters**

LARRY BESON
4TH DISTRICT

JESSE DOCKETT
6TH DISTRICT

The Board of Commissioners is scheduled to make these appointments at its **March 18, 2025**, meeting.

JEROME CRETE
7TH DISTRICT

Should you require any additional information, please do not hesitate to contact our office.

ALEX POIRIER
BOARD ADVISOR
Poiriera@baycountymi.gov

Sincerely,

Lindsey Arsenault
Board Coordinator

LINDSEY ARSENAULT
BOARD COORDINATOR
Arsenaultl@baycountymi.gov



Application for Appointment to BABHA

From postmaster@netsource-one.net <postmaster@netsource-one.net>

Date Sun 2/16/2025 4:22 PM

To Board Applications <boardapplications@baycountymi.gov>

Name: Christopher Girard
 Address: 100 Braddock Street
 CityStateZip: Bay City
 Home Phone: 989-450-7827

Business

Phone::

Occupation: Mayor
 Employer: City of Bay City
 Resident?: Yes
 How Long?: 45 years

Interests: I am the current Secretary of the BABHA Board.

I have previously served formerly as an Executive Director serving BABHA consumers for over 20 years. I have State level relationships to help advocate for our local consumers of BABHA services. I currently serve as Mayor for the City of Bay City which will allow me to advocate for services provided by BABHA.

Other: My family has been involved with Mental Health Services my whole life. I'm a strong advocate for the vulnerable individuals served through BABHA. My granddaughter, who experiences Autism, allows me to have direct knowledge and experience of services provided by BABHA. I have also been a direct recipient of mental health services in my lifetime and know the important role these services provide in our community.

Email: cgirard1@msn.com

- 1): yes, I am 18 years of age or older (must be 18+)
- 2): no, I am a county commissioner (limit of 4 commissioners)
- 3): yes, I am a state, county or local public official (limit of 6 officials serving in an elected or appointed public office or employed more than 20 hours/week by an agency of federal, state, city or local government)
- 4): yes, I live in Bay County (must have primary residence in Bay County)
- 5): no, I am employed by the Michigan Department of Community Health
- 6): no, I am employed by BABHA
- 7): no, I am a party to a contract with community mental health or administering or benefitting financially from a contract with BABHA
- 8): no, I serve in a policy-making position with an agency under contract with BABHA (If you checked yes to 5, 6, 7 or 8 you cannot be appointed to the BABHA Board)
- 9): yes, I am/have been a primary consumer of mental health services. (primary consumer means an individual who has received or is receiving service from the Department of Community Health or a community mental health services program or services from the private sector equivalent to those offered by the Department of Community Health or community mental health services program. This means just about any mental health service you have ever received in your entire lifetime).
- 10): yes, I am/have been a family member of a primary consumer (Family member means parent, step-parent, spouse, sibling, child or grandparent of a primary consumer or an individual upon whom a primary consumer is dependent for at least 50% of his or her financial support. Same service and timeframe criteria as primary consumer).
- 11): yes, I can be identified as a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so. I waive only those rights under the Mental Health Code that are necessary to make this identification.
- 12): yes, I can be identified as a family member of a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so.



Application for Appointment to BABHA

From postmaster@netsource-one.net <postmaster@netsource-one.net>

Date Tue 2/18/2025 10:05 AM

To Board Applications <boardapplications@baycountymi.gov>

Name: Robert J. Pawlak

Address: 260 N. Pine Rd.

CityStateZip: BAY CITY

Home Phone: 9892337320

Business Phone: 9898927221

Phone: :

Occupation: Teacher/Twp. Supervisor

Employer: SVSU/Portsmouth Twp

Resident?: Yes

How Long?: 66 years

Interests: I have long been an advocate for Behavioral Health. I have relatives who have been provided with services in the past. I have been a dedicated member of BABH on both the local and state level, and like to continue serving on behalf of Bay County.

Other: It has been a pleasure to serve on the BABH Board. The Bay Arenac Behavioral Health Authority is recognized throughout the state as a model of what a behavioral health program should look like.. I can proudly say that I have been a part of its achieving this status.

Email: bopav@aol.com

1): yes, I am 18 years of age or older (must be 18+)

2): no, I am a county commissioner (limit of 4 commissioners)

3): yes, I am a state, county or local public official (limit of 6 officials serving in an elected or appointed public office or employed more than 20 hours/week by an agency of federal, state, city or local government)

4): yes, I live in Bay County (must have primary residence in Bay County)

5): no, I am employed by the Michigan Department of Community Health

6): no, I am employed by BABHA

7): no, I am a party to a contract with community mental health or administering or benefitting financially from a contract with BABHA

8): no, I serve in a policy-making position with an agency under contract with BABHA (If you checked yes to 5, 6, 7 or 8 you cannot be appointed to the BABHA Board)

9): yes, I am/have been a primary consumer of mental health services. (primary consumer means an individual who has received or is receiving service from the Department of Community Health or a community mental health services program or services from the private sector equivalent to those offered by the Department of Community Health or community mental health services program. This means just about any mental health service you have ever received in your entire lifetime).

10): yes, I am/have been a family member of a primary consumer (Family member means parent, step-parent, spouse, sibling, child or grandparent of a primary consumer or an individual upon whom a primary consumer is dependent for at least 50% of his or her financial support. Same service and timeframe criteria as primary consumer).

11): no, I can be identified as a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so. I waive only those rights under the Mental Health Code that are necessary to make this identification.

12): no, I can be identified as a family member of a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so.

Richard Byrne
710 E. Whitefeather
Pinconning, MI 48650
989-615-8585
Redhorse2121@yahoo.com

February 11, 2025

Tim Banaszak, Chairman
Bay County Board of Commissioners
515 Center Avenue, Suite 405
Bay City, MI 48708

Dear Chairman, Banaszak:

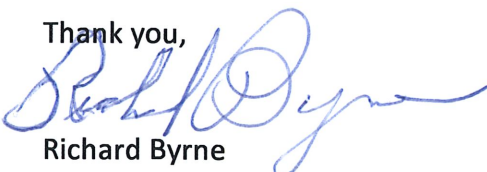
My term as a Board member on the Bay Arenac Behavioral Health (BABH) Board of Directors expires March 31, 2025. Please accept this letter and attached application as my request seeking reappointment for another 3-year term.

The services provided by BABH in our community are invaluable to persons with developmental disabilities, severe mental illness, and substance use disorders. BABH programs offer supports and services for individuals to attain the highest quality of life by building relationships in the community and making positive personal choices through empowerment and recovery-based practices.

BABH continues to advocate with the State to preserve the local health care safety net and maintain the county-based structure of community mental health services. This has included continued efforts to resist commercialization of public mental health services via legislative appropriation, expansion of community supports such as the Mobile Response Team, and increasing supports in the juvenile detention center, the County Jail, the public school system, and the residential provider system.

I have served on the BABH Board since 1992. During my tenure, I have served as chair for various board committees, and fulfilled the role as Vice Chair and Chair of the full Board. I believe the public behavioral health system is crucial to the residents of Bay County. My tenure on the board, public sector experience, and life-long commitment to the community make me an excellent candidate for the BABH Board and allows me a different perspective when considering policy matters as a Board member and advocating for the community.

Thank you,



Richard Byrne

Bay County Board of Commissioners

County of Bay Application for Appointment to Bay-Arenac Behavioral Health Authority (BABHA)

Name: RICHARD LOUIS BYRNE
Address: 710 E. WHITEFEATHER RD. PINCONNING MI. 48650
Phone: 989 879 3161
Email: REDHORSE 2121 @ YAHOO.COM
Occupation: RETIRED
Employer: _____
Are you a resident of Bay County: YES

Please list your interests and qualifications for the BABHA Board:

CONTINUE TO PROVIDE THE BEST SERVICE
AND CARE TO THOSE IN NEED OF OUR
SERVICES

List any other information you feel would be pertinent in assisting the County Board of Commissioners in their selection:

PRIMARY CONSUMER :
VETERAN'S ADMINISTRATION

Date Submitted: FEB 18 2025

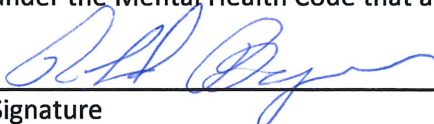
Red Byrne



Bay-Arenac Behavioral Health Authority (BABHA) Board Member Application Questionnaire

According to the Mental Health Code (1995, PA 290 MCL 330.1222) certain requirements and limitations are imposed on the composition of the community mental health board membership. Please respond to the following questions:

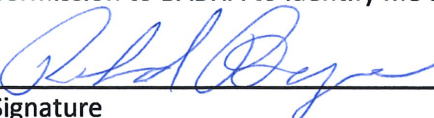
- | YES | NO | |
|----------|----------|--|
| <u>X</u> | | 1) I am 18 years of age or older (must be 18+) |
| | <u>X</u> | 2) I am a county commissioner (limit of 4 commissioners) |
| | <u>X</u> | 3) I am a state, county or local public official (limit of 6 officials serving in an elected or appointed public office or employed more than 20 hours/week by an agency of federal, state, city or local government) |
| <u>X</u> | | 4) I live in Bay County (must have primary residence in Bay County) |
| | <u>X</u> | 5) I am employed by the Michigan Department of Community Health |
| | <u>X</u> | 6) I am employed by BABHA |
| | <u>X</u> | 7) I am a party to a contract with community mental health or administering or benefitting financially from a contract with BABHA |
| | <u>X</u> | 8) I serve in a policy-making position with an agency under contract with BABHA |
| | | (If you checked yes to 5, 6, 7 or 8 you cannot be appointed to the BABHA Board) |
| <u>X</u> | | 9) I am/have been a primary consumer of mental health services. (primary consumer means an individual who has received or is receiving service from the Department of Community Health or a community mental health services program or services from the private sector equivalent to those offered by the Department of Community Health or community mental health services program. This means just about any mental health service you have ever received in your entire lifetime). |
| <u>X</u> | | 10) I am/have been a family member of a primary consumer (Family member means parent, step-parent, spouse, sibling, child or grandparent of a primary consumer or an individual upon whom a primary consumer is dependent for at least 50% of his or her financial support. Same service and timeframe criteria as primary consumer). |
| | | For items 9 and 10, 1/3 of the BABHA Board (4 members) must be primary consumers or family members and of that 1/3 at least 1/2 (2 members) shall be primary consumers. |
| <u>X</u> | | 11) I can be identified as a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so. I waive only those rights under the Mental Health Code that are necessary to make this identification. |


Signature

FEB, 15 2025
Date

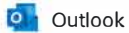
This release/waiver can be revoked at any time.

- | | | |
|----------|--|---|
| <u>X</u> | | 12) I can be identified as a family member of a primary consumer and hereby grant permission to BABHA to identify me as such when asked to do so. |
|----------|--|---|


Signature

FEB 15 2025
Date

This release/waiver can be revoked at any time.



Application for Appointment to BABHA

From postmaster@netsource-one.net <postmaster@netsource-one.net>

Date Wed 2/19/2025 1:26 PM

To Board Applications <boardapplications@baycountymi.gov>

Name: Shelley King

Address: 748 Shook Court

CityStateZip: Bay City, MI 48708

Home Phone: 989.450.2423

Business

Phone::

Occupation: Retired

Employer: State of MI

Resident?: Yes

How Long?: 29 Years

Interests: I have a Bachelor of Science Degree in Social Work. I retired from the State of Michigan, Department of Corrections after 25+ years of service. I retired as an Assistant Deputy Warden in charge of Programs and Housing. I counseled many prisoners throughout my career, along with completing many required forms to advocate them upon their possible release from prison.

Other: I am interested in becoming part of a community that is committed to educating the community about mental health, physical health, and the overall well being of those in need of services. I would like to help them receive the services they need, so they may become able to take care of themselves for effectively.

Email: Kingsct3@yahoo.com

1): yes, I am 18 years of age or older (must be 18+)

2): no, I am a county commissioner (limit of 4 commissioners)

3): no, I am a state, county or local public official (limit of 6 officials serving in an elected or appointed public office or employed more than 20 hours/week by an agency of federal, state, city or local government)

4): yes, I live in Bay County (must have primary residence in Bay County)

5): no, I am employed by the Michigan Department of Community Health

6): no, I am employed by BABHA

7): no, I am a party to a contract with community mental health or administering or benefitting financially from a contract with BABHA

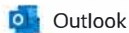
8): no, I serve in a policy-making position with an agency under contract with BABHA (If you checked yes to 5, 6, 7 or 8 you cannot be appointed to the BABHA Board)

9): no, I am/have been a primary consumer of mental health services. (primary consumer means an individual who has received or is receiving service from the Department of Community Health or a community mental health services program or services from the private sector equivalent to those offered by the Department of Community Health or community mental health services program. This means just about any mental health service you have ever received in your entire lifetime).

10): no, I am/have been a family member of a primary consumer (Family member means parent, step-parent, spouse, sibling, child or grandparent of a primary consumer or an individual upon whom a primary consumer is dependent for at least 50% of his or her financial support. Same service and timeframe criteria as primary consumer).

11): no, I can be identified as a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so. I waive only those rights under the Mental Health Code that are necessary to make this identification.

12): no, I can be identified as a family member of a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so.

**Application for Appointment to BABHA**

From postmaster@netsource-one.net <postmaster@netsource-one.net>

Date Tue 2/25/2025 11:54 AM

To Board Applications <boardapplications@baycountymi.gov>

Name: Sandy Shutt

Address: 5653 Stoney Creek Drive Cortland Fa

CityStateZip: City of Bay City, MI (Utility) (RT2

Home Phone: 9895452965

Business n/a

Phone::

Occupation: Registered Nurse - Retired

Employer: McLaren

Resident?: Yes

How Long?: 65 yrs

Interests: With over 40+ years in healthcare, I have a varied background in the functionality of the healthcare system, including state and federal regulations, financial management, in addition to clinical needs. I find the longevity of board members to be a positive in the oversight of these programs and would present that I would be able to augment their efforts. If selected, I would be happy to fulfill the partial term which is now available,

Other: During my tenure as Chair of the Bay/Arenac DHHS Board, one of my co-board members, who is a member of the BABH Board, introduced the need for additional collaboration with the BABH services and the needs of the DHHS clients, and since there is such a lacking of facilities/services for our adolescent population, I would work to enhance and facilitate this relationship.

Email: sshutt922@gmail.com

1): yes, I am 18 years of age or older (must be 18+)

2): no, I am a county commissioner (limit of 4 commissioners)

3): no, I am a state, county or local public official (limit of 6 officials serving in an elected or appointed public office or employed more than 20 hours/week by an agency of federal, state, city or local government)

4): yes, I live in Bay County (must have primary residence in Bay County)

5): no, I am employed by the Michigan Department of Community Health

6): no, I am employed by BABHA

7): no, I am a party to a contract with community mental health or administering or benefitting financially from a contract with BABHA

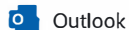
8): no, I serve in a policy-making position with an agency under contract with BABHA (If you checked yes to 5, 6, 7 or 8 you cannot be appointed to the BABHA Board)

9): no, I am/have been a primary consumer of mental health services. (primary consumer means an individual who has received or is receiving service from the Department of Community Health or a community mental health services program or services from the private sector equivalent to those offered by the Department of Community Health or community mental health services program. This means just about any mental health service you have ever received in your entire lifetime).

10): no, I am/have been a family member of a primary consumer (Family member means parent, step-parent, spouse, sibling, child or grandparent of a primary consumer or an individual upon whom a primary consumer is dependent for at least 50% of his or her financial support. Same service and timeframe criteria as primary consumer).

11): no, I can be identified as a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so. I waive only those rights under the Mental Health Code that are necessary to make this identification.

12): no, I can be identified as a family member of a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so.



Application for Appointment to BABHA

From postmaster@netsource-one.net <postmaster@netsource-one.net>

Date Wed 2/26/2025 1:46 PM

To Board Applications <boardapplications@baycountymi.gov>

Name: Justin Peters

Address: 367 old orchard

CityStateZip: Essexville, MI 48732

Home Phone: 989-280-1369

Business Phone:: 989-280-1369

Occupation: Retired

Employer: N/a

Resident?: Yes

How Long?: 49 years

Interests: I have served on the board for 4 years in the past, am currently on the recipient rights committee, as well as an active board member on our regions substance use disorder.

Other:

Over the years I have established a good working relationship with our ceo, and many of the Babh staff. When I was on the board I was working with the HR department to try and think of ways outside of the box to bring in and maintain staff due to the high turnover. I served on various committees one of which was our audit committee and helped in potentially saving money on contracts and other higher priced expenditures. I'm passionate with maintaining and furthering our goals within the organization. Being retired I am flexible with our meeting schedule. There are no aspirations to use this position to pad my political resume, and I'm focused on doing the best that I can for the organization as I have in the past and still do with my limited involvement

Email: Comicmonkey1@outlook.com

1): yes, I am 18 years of age or older (must be 18+)

2): no, I am a county commissioner (limit of 4 commissioners)

3): no, I am a state, county or lcal public official (limit of 6 officials serving in an elected or appointed public office or employed more than 20 hours/week by an agency of federal, state, city or local government)

4): yes, I live in Bay County (must have primary residence in Bay County)

5): no, I am employed by the Michigan Department of Community Health

6): no, I am employed by BABHA

7): no, I am a party to a contract with community mental health or administering or benefitting financially from a contract with BABHA

8): no, I serve in a policy-making position with an agency under contract with BABHA (If you checked yes to 5, 6, 7 or 8 you cannot be appointed to the BABHA Board)

9): yes, I am/have been a primary consumer of mental health services. (primary consumer means an individual who has received or is receiving service from the Department of Community Health or a community mental health services program or services from the private sector equivalent to those offered by the Department of Community Health or community mental health services program. This means just about any mental health service you have ever received in your entire lifetime).

10): yes, I am/have been a family member of a primary consumer (Family member means parent, step-parent, spouse, sibling, child or grandparent of a primary consumer or an individual upon whom a primary consumer is dependent for at least 50% of his or her financial support. Same service and timeframe criteria as primary consumer).

11): yes, I can be identified as a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so. I waive only those rights under the Mental Health Code that are necessary to make this identification.

12): yes, I can be identified as a family member of a primary consumer and hereby grant permission to the BABHA Board to identify me as such when asked to do so.



Chief Executive Officer
Christopher Pinter

Board of Directors
Richard Byrne, Chair
Robert Pawlak, Vice Chair
Patrick McFarland, Treasurer
Christopher Girard, Secretary
Tim Banaszak
Patrick Conley
Jerome Crete
Sally Mrozinski
Kathy Niemiec
Carole O'Brien
Pamela Schumacher

Board Administration
Behavioral Health Center
201 Mulholland
Bay City, MI 48708
800-448-5498 Access Center
989-895-2300 Business

Arenac Center
PO Box 1188
1000 W. Cedar
Standish, MI 48658

North Bay
1961 E. Parish Road
Kawkawlin, MI 48631

William B. Cammin Clinic
1010 N. Madison
Bay City, MI 48708

www.babha.org

March 6, 2025

Tim Banaszak, Chairperson
Bay County Board of Commissioners
515 Center Avenue, Suite 405
Bay City, MI 48708

Dear Chairperson Banaszak:

On March 31, 2025, three (3) Bay County appointments on the Bay Arenac Behavioral Health Authority (BABH) Board of Directors will expire. These 3 positions are each for a three year term commencing April 1, 2025 and expiring March 31, 2028. In addition, there is one (1) vacant position with a term commencing immediately upon appointment and expiring March 31, 2026 due to the resignation of Mrs. Toni Reese.

The BABH Nominations Committee met on March 6, 2025 to review the applications received by the Office of the Bay County Board of Commissioners. Six (6) applications were reviewed.

The applications were reviewed pursuant to the Mental Health Code, Public Act 258 of 1974, as amended. There are two separate categories of consumer eligibility for the applicants to qualify in order to ensure that BABH meets the Board requirements of the Mental Health Code (MHC), Section 222 (1) composition, primary consumers and family members of primary consumers. The BABHA Boards needs at least three (3) consumers, one of which must be a primary consumer.

The first category must be representative of primary consumers as defined in the MHC. There are three (3) applicants that meet this criteria. The second category is representative of family members of primary consumers. There are three (3) applicants that meet this criteria. The last category is comprised of the general public, and all the applicants meet this criteria. Attached please find a report for consideration by the Bay County Board of Commissioners.

Thank you for your attention to this matter. The BABH Board will await notification of appointments by the Bay County Board of Commisisoners.

Respectfully,

Sara K. McRae
Executive Assistant to the CEO



Nomination Committee Report
March 6, 2025

Qualifying Applicants for Membership on the BABH Board of Directors

Bay County Board of Commissioners

Please appoint four (4) total:

Primary Consumers – Please appoint one (1):

Richard Byrne
Christopher Girard
Justin Peters

Family Member – Please appoint two (2):

Christopher Girard
Justin Peters
Robert Pawlak

General Public – Please appoint one (1):

Richard Byrne
Christopher Girard
Shelley King
Robert Pawlak
Justin Peters
Sandy Shutt

Please specify which appointments are:

1) The three (3) members with terms commencing April 1, 2025 and expiring March 31, 2028

&

2) The one (1) member with a term expiring commencing immediately and expiring March 31, 2026

March 2025

BABH Board of Directors

March 2025						
Su	Mo	Tu	We	Th	Fr	Sa
2	3	4	5	6	7	1
9	10	11	12	13	14	8
16	17	18	19	20	21	15
23	24	25	26	27	28	22
30	31					29

April 2025						
Su	Mo	Tu	We	Th	Fr	Sa
6	7	1	2	3	4	5
13	14	8	9	10	11	12
20	21	15	16	17	18	19
27	28	22	23	24	25	26
		29	30			

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Feb 23	24	25	26	27	28	Mar 1
2	3	4	5	6 4:00pm Nomination Committee 5:00pm Facilities & Safety Committee	7	8
9	10 5:00pm Recipient Rights Advisory & Appeals Committee	11	12 5:00pm Finance Committee	13 5:00pm Program Committee	14	15
16	17 Saint Patrick's Day 5:00pm Audit Committee	18	19	20 5:00pm REGULAR BOARD MEETING	21	22
23	24	25	26	27	28	29
30	31	Apr 1	2	3	4	5

April 2025

BABH Board of Directors

April 2025						
Su	Mo	Tu	We	Th	Fr	Sa
6	7	1	2	3	4	5
13	14	8	9	10	11	12
20	21	15	16	17	18	19
27	28	22	23	24	25	26

May 2025						
Su	Mo	Tu	We	Th	Fr	Sa
4	5	6	7	1	2	3
11	12	13	14	8	9	10
18	19	20	21	15	16	17
25	26	27	28	22	23	24
				29	30	31

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Mar 30	31	Apr 1	2	3 5:00pm Personnel & Compensation Committee	4	5
6	7 5:00pm Recipient Rights Advisory & Appeals Committee	8	9 5:00pm Finance Committee	10 5:00pm Program Committee	11	12
13	14 5:00pm Audit Committee	15	16	17 5:00pm REGULAR BOARD MEETING	18 Good Friday/BABH Offices Closed	19
20 Easter	21	22	23	24	25	26
27	28	29	30	May 1	2	3