

Agency Report of: Public Official Appointments

A Public Document

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|--|--|---------------------------|--|
| 1. Agency Name City of Calabasas | | | California Form 806 For Official Use Only |
| Division, Department, or Region (If Applicable) | | | |
| Designated Agency Contact (Name, Title) Maricela Hernandez, MMC, CPMC | | | |
| Area Code/Phone Number 818-224-1661 | E-mail mhernandez@cityofcalabasas.com | Page <u>1</u> of <u>2</u> | Date Posted: <u>8/7/19</u> <small>(Month, Day, Year)</small> |

2. Appointments

| Agency Boards and Commissions | Name of Appointed Person | Appt Date and Length of Term | Per Meeting/Annual Salary/Stipend |
|--|--|--|---|
| California Contract Cities Association | ▶ Name <u>James R. Bozajian</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 23 / 19</u> <small>Appt Date</small> _____ <small>Length of Term</small> | ▶ Per Meeting: \$ <u>250.00</u> ▶ Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small> |
| California Joint Powers Authority | ▶ Name <u>James R. Bozajian</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 23 / 19</u> <small>Appt Date</small> _____ <small>Length of Term</small> | ▶ Per Meeting: \$ <u>100.00</u> ▶ Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small> |
| Los Angeles County West Vector & Vector-Borne Disease Control District | ▶ Name <u>James R. Bozajian</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>11 / 28 / 18</u> <small>Appt Date</small> _____ <small>Length of Term</small> | ▶ Per Meeting: \$ <u>100.00</u> ▶ Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small> |
| Southern California Association of Governments (SCAG) - Regional Council | ▶ Name <u>David J. Shapiro</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>03 / 19 / 19</u> <small>Appt Date</small> <u>Two years</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>120.00</u> ▶ Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small> |

3. Verification

I have read and understand FPPC Regulation 18702.5. I have verified that the appointment and information identified above is true to the best of my information and belief.


Signature of Agency Head or Designee

Maricela Hernandez, MMC
Print Name

City Clerk
Title

8/6/19
(Month, Day, Year)

Comment: _____

**Agency Report of:
Public Official Appointments
Continuation Sheet**

1. Agency Name

City of Calabasas

Date Posted: 8/7/19
(Month, Day, Year)

2. Appointments

| Agency Boards and Commissions | Name of Appointed Person | Appt Date and Length of Term | Per Meeting/Annual Salary/Stipend |
|---|---|---|---|
| Southern California Association of Governments (SCAG) - Transportation Committee | ▶ Name <u>Alicia Weintraub</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 23 / 19</u> <i>Appt Date</i> <u>One year</u> <i>Length of Term</i> | ▶ Per Meeting: \$ <u>120.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <i>Other</i> |
| Southern California Association of Governments (SCAG) - Community, Economic & Human Development Committee | ▶ Name <u>David J. Shapiro</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 23 / 19</u> <i>Appt Date</i> <u>One year</u> <i>Length of Term</i> | ▶ Per Meeting: \$ <u>120.00</u> ▶ Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <i>Other</i> |
| | ▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ _____ <i>Appt Date</i> _____ <i>Length of Term</i> | ▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <i>Other</i> |
| | ▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ _____ <i>Appt Date</i> _____ <i>Length of Term</i> | ▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <i>Other</i> |
| | ▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ _____ <i>Appt Date</i> _____ <i>Length of Term</i> | ▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <i>Other</i> |
| | ▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ _____ <i>Appt Date</i> _____ <i>Length of Term</i> | ▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <i>Other</i> |