

**Agency Report of:
Public Official Appointments**

A Public Document

| | | | |
|--|-----------------------|----------------------------|--|
| 1. Agency Name | | California Form 806 | For Official Use Only |
| County of Yuba | | | |
| Division, Department, or Region (If Applicable) | | | |
| Board of Supervisors | | | |
| Designated Agency Contact (Name, Title) | | | |
| Rachel Ferris, Clerk of the Board of Supervisors | | | |
| Area Code/Phone Number | E-mail | Page <u>1</u> of <u>2</u> | Date Posted: <u>3-12-2020</u> <small>(Month, Day, Year)</small> |
| 530-749-7510 | rferris@co.yuba.ca.us | | |

2. Appointments

| Agency Boards and Commissions | Name of Appointed Person | Appt Date and Length of Term | Per Meeting/Annual Salary/Stipend |
|---|---|--|--|
| Feather River Air Quality Management District | ▶ Name <u>Fletcher, Randy/Bradford, Gary</u> <small>(Last, First)</small> Alternate, if any <u>Lofton, Doug</u> <small>(Last, First)</small> | ▶ <u>2 / 11 / 20</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>100</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"/> <u> </u> Other |
| North Central Counties Consortium | ▶ Name <u>Fletcher, Randy</u> <small>(Last, First)</small> Alternate, if any <u>Bradford, Gary</u> <small>(Last, First)</small> | ▶ <u>2 / 11 / 20</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>100</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"/> <u> </u> Other |
| Regional Housing Authority | ▶ Name <u>Lofton, Doug</u> <small>(Last, First)</small> Alternate, if any <u>Fletcher, Randy</u> <small>(Last, First)</small> | ▶ <u>2 / 11 / 20</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>50</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"/> <u> </u> Other |
| Regional Waste Management | ▶ Name <u>Bradford, Gary</u> <small>(Last, First)</small> Alternate, if any <u>Vasquez, Andy</u> <small>(Last, First)</small> | ▶ <u>2 / 11 / 20</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>50</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"/> <u> </u> Other |

3. Verification

I have read and understand FRPC 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

Rachel Ferris
Print Name

Clerk of the Board
Title

3/12/2020
(Month, Day, Year)

Comment: _____

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

| | |
|---|--|
| 1. Agency Name County of Yuba | Date Posted: _____ <small>(Month, Day, Year)</small> |
|---|--|

| Agency Boards and Commissions | Name of Appointed Person | Appt Date and Length of Term | Per Meeting/Annual Salary/Stipend |
|--|---|--|--|
| Sacramento Area Council of Governments | ▶ Name <u>Leahy, Mike</u> <small>(Last, First)</small> Alternate, if any <u>Vasquez, Andy</u> <small>(Last, First)</small> | ▶ <u>2 / 11 / 20</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>100</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"/> Other |
| Sierra-Sacramento Valley Emergency Management Services | ▶ Name <u>Lofton, Doug</u> <small>(Last, First)</small> Alternate, if any <u>Bradford, Gary</u> <small>(Last, First)</small> | ▶ <u>2 / 11 / 20</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>50</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"/> Other |
| Yuba Sutter Transit Authority | ▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ _____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small> | ▶ 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"/> Other |
| _____ | ▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ _____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small> | ▶ 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"/> Other |
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