

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name San Benito County Board of Supervisors		FILED NOV 22 2017 JOE PAUL GONZALEZ COUNTY CLERK <i>Michael J. Pearson</i>	California Form 806 <small>For Official Use Only</small>
Division, Department, or Region (If Applicable)			Date Posted: (Month, Day, Year)
Designated Agency Contact (Name, Title) Chase Graves, Clerk of the Board of Supervisors		Page <u>1</u> of <u>1</u>	
Area Code/Phone Number (831) 636-4000	E-mail cgraves@cosb.us		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Association of Monterey Bay Area Governments	▶ Name <u>Rivas, Robert</u> <small>(Last, First)</small>	▶ <u>01 / 10 / 17</u> <small>Appt Date</small>	▶ Per Meeting: \$ <u>50.00</u>
	Alternate, if any <u>Jaime De La Cruz</u> <small>(Last, First)</small>	▶ <u>1 year</u> <small>Length of Term</small>	▶ 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
Association of Monterey Bay Area Governments	▶ Name <u>Muenzer, Jerry</u> <small>(Last, First)</small>	▶ <u>01 / 10 / 17</u> <small>Appt Date</small>	▶ Per Meeting: \$ <u>50.00</u>
	Alternate, if any <u>De La Cruz, Jaime</u> <small>(Last, First)</small>	▶ <u>1 year</u> <small>Length of Term</small>	▶ 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
Council of Governments	▶ Name <u>Botelho, Anthony</u> <small>(Last, First)</small>	▶ <u>01 / 10 / 17</u> <small>Appt Date</small>	▶ Per Meeting: \$ <u>100.00</u>
	Alternate, if any <u>Medina, Mark</u> <small>(Last, First)</small>	▶ <u>1 year</u> <small>Length of Term</small>	▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Council of Governments	▶ Name <u>De La Cruz, Jaime</u> <small>(Last, First)</small>	▶ <u>01 / 10 / 17</u> <small>Appt Date</small>	▶ Per Meeting: \$ <u>100.00</u>
	Alternate, if any <u>Medina, Mark</u> <small>(Last, First)</small>	▶ <u>1 year</u> <small>Length of Term</small>	▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other

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.

Chase Graves Chase Graves Clerk of the Board 11/22/17
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____