Agency Report of: Public Official Appointments

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	ubiic Official Appoin	unents		A Public Document				
1.	Agency Name			California ONG				
	City of Woodland			Form 806				
	Division, Department, or Reg	ion (If Applicable)		For Official Use Only				
	Designated Agency Contact	(Name, Title)						
	Ana B. Gonzalez, City Cler	k						
	Area Code/Phone Number	E-mail		Date Posted:				
	(530) 661-5806	ana.gonzalez@cityofwoodland.org	Page1c	of				
2.	Appointments							
	Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend				
	Yolo County Transportation District	Name Marble, Bill (Last, First) Alternate, if any Denny, Sean (Last, First)	▶ 07 / 15 / 14 Appt Date 2 years Length of Term	▶ Per Meeting: \$				
	Sacramento Mosquito and Vector Control	Name Denny, Sean (Last, First) Alternate, if any(Last, First)	▶ 07 / 15 / 14 Appt Date 2 years Length of Term	▶ Per Meeting: \$				
		Name(Last, First) Alternate, if any(Last, First)	Appt Date Length of Term	▶ Per Meeting: \$				
		▶Name(Last, First) Alternate, if any(Last, First)	Appt Date Appt Date Length of Term	▶ Per Meeting: \$ ▶ Estimated Annual: \$ \$0-\$1,000 \$2,001-\$3,000 \$1,001-\$2,000 \$ Other				
	Verification I have read and understand FPPC Regulation Signature of Agency Head or Designe	Ana B. Gonzalez Print Name	nation identified above is tru City Cler Title					
	Comment:							