

**Agency Report of:
Public Official Appointments**

A Public Document

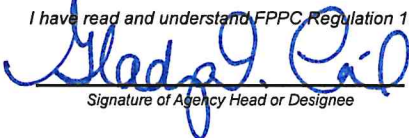
1. Agency Name Napa County		California Form 806 For Official Use Only
Division, Department, or Region (If Applicable) Napa County City Selection Committee		
Designated Agency Contact (Name, Title) Gladys I. Coil, Clerk of the Board of Supervisors		Date Posted: 5-2-17 (Month, Day, Year)
Area Code/Phone Number 707-253-4421	E-mail gladys.coil@countyofnapa.org	
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2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Association of Bay Area Governments (ABAG) - Executive Board	▶ Name <u>Garcia, Leon</u> <small>(Last, First)</small> Alternate, if any <u>Alan Galbraith</u> <small>(Last, First)</small>	▶ <u>4 / 05 / 16</u> <small>Appt Date</small> ▶ <u>06-30-18</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</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"/> Other
Local Agency Formation Commission (LAFCO)	▶ Name <u>Inman, Juliana</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>5 / 2 / 15</u> <small>Appt Date</small> ▶ <u>05-01-19</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>125.00</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"/> Other
Local Agency Formation Commission (LAFCO)	▶ Name <u>Mohler, Marjorie</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>5 / 2 / 17</u> <small>Appt Date</small> ▶ <u>05-03-2021</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>125.00</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"/> Other
Local Agency Formation Commission (LAFCO)	▶ Name _____ <small>(Last, First)</small> Alternate, if any <u>Leary, Kenneth</u> <small>(Last, First)</small>	▶ <u>1 / 10 / 17</u> <small>Appt Date</small> ▶ <u>05-06-2019</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>125.00</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"/> Other

3. Verification

I have read and understand FPPC Regulation 18705.5. I have verified that the appointment and information identified above is true to the best of my information and belief.


Gladys I. Coil
Clerk of the Board
5-2-17
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____

Agency Report of:
Public Official Appointments
Continuation Sheet

1. Agency Name Napa County	Date Posted: <u>5-2-17</u> <small>(Month, Day, Year)</small>
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Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
North Bay Appointment to the San Francisco Bay Conservation and Development Commission (BCDC)	▶ Name <u>Techel, Jill</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>3 / 15 / 12</u> <small>Appt Date</small> ▶ <u>no term</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</u> ▶ 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"/> _____ <small>Other</small>
	▶ 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"/> _____ <small>Other</small>
	▶ 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"/> _____ <small>Other</small>
	▶ 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"/> _____ <small>Other</small>
	▶ 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"/> _____ <small>Other</small>
	▶ 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"/> _____ <small>Other</small>