

**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			Date Posted: 6-27-2022 <small>(Month, Day, Year)</small>
Designated Agency Contact (Name, Title) Neha Hoskins, Secretary of the City Selection Committee			
Area Code/Phone Number 707-253-4421	E-mail neha.hoskins@countyofnapa.org	Page <u>1</u> of <u>1</u>	

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>	▶ <u>06 / 21 / 22</u> <small>Appt Date</small>	▶ Per Meeting: \$ <u>150.00</u>
	Alternate, if any <u>Chouteau, Anna</u> <small>(Last, First)</small>	▶ <u>06-30-24</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
Local Agency Formation Commission (LAFCO)	▶ Name <u>Mohler, Marjorie</u> <small>(Last, First)</small>	▶ <u>07 / 20 / 21</u> <small>Appt Date</small>	▶ Per Meeting: \$ <u>125.00</u>
	Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>05-05-25</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
Local Agency Formation Commission (LAFCO)	▶ Name <u>Aboudamous, Mariam</u> <small>(Last, First)</small>	▶ <u>04 / 16 / 19</u> <small>Appt Date</small>	▶ Per Meeting: \$ <u>125.00</u>
	Alternate, if any <u>Painter, Beth</u> <small>(Last, First)</small>	▶ <u>05-01-23</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
	▶ Name _____ <small>(Last, First)</small>	▶ _____ <small>Appt Date</small>	▶ Per Meeting: \$ _____
	Alternate, if any _____ <small>(Last, First)</small>	▶ _____ <small>Length of Term</small>	▶ 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

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.

Neha Hoskins
Secretary of the Committee
6-27-2022
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____