

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name Goleta Water District		California Form 806 For Official Use Only	
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) John McInnes			
Area Code/Phone Number (805) 879-4621	E-mail jmcinnes@goletawater.com	Page <u>1</u> of <u>2</u>	Date Posted: <u>1/9/19</u> <small>(Month, Day, Year)</small>

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Association of California Water Agencies (ACWA) & Association of California Water Agencies Joint Powers Insurance Authority (JPIA)	▶ Name <u>Rosen, William</u> <small>(Last, First)</small> Alternate, if any <u>Evans, Tom</u> <small>(Last, First)</small>	▶ <u>1 / 8 / 19</u> <small>Appt Date</small> ▶ <u>12 months</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>\$220.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Cachuma Conservation Release Board (CCRB)	▶ Name <u>Hanson, Lauren</u> <small>(Last, First)</small> Alternate, if any <u>Borah, Farfalla</u> <small>(Last, First)</small>	▶ <u>1 / 8 / 19</u> <small>Appt Date</small> ▶ <u>12 months</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>\$220.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Cachuma Operation & Maintenance Board (COMB) - paid by COMB	▶ Name <u>Hanson, Lauren</u> <small>(Last, First)</small> Alternate, if any <u>Borah, Farfalla</u> <small>(Last, First)</small>	▶ <u>1 / 8 / 19</u> <small>Appt Date</small> ▶ <u>12 months</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>\$150.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Central Coast Water Authority (CCWA)	▶ Name <u>Borah, Farfalla</u> <small>(Last, First)</small> Alternate, if any <u>Hanson, Lauren</u> <small>(Last, First)</small>	▶ <u>1 / 8 / 19</u> <small>Appt Date</small> ▶ <u>12 months</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>\$220.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" 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.

	John McInnes	General Manager	1/9/19
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

Comment: _____

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

1. Agency Name
Goleta Water District

Date Posted: 1/9/19
(Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Santa Barbara County California Special Districts Association (SBCCSDA)	▶ Name <u>Evans, Tom</u> <i>(Last, First)</i> Alternate, if any <u>Rosen, William</u> <i>(Last, First)</i>	▶ <u>1 / 8 / 19</u> <i>Appt Date</i> <u>12 months</u> <i>Length of Term</i>	▶ Per Meeting: \$ <u>\$220.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Goleta Sanitary District	▶ Name <u>Evans, Tom</u> <i>(Last, First)</i> Alternate, if any <u>Rosen, William</u> <i>(Last, First)</i>	▶ <u>1 / 8 / 19</u> <i>Appt Date</i> <u>12 months</u> <i>Length of Term</i>	▶ Per Meeting: \$ <u>\$220.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
	▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i>	▶ _____ <i>Appt Date</i> _____ <i>Length of Term</i>	▶ 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 _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i>	▶ _____ <i>Appt Date</i> _____ <i>Length of Term</i>	▶ 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 _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i>	▶ _____ <i>Appt Date</i> _____ <i>Length of Term</i>	▶ 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 _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i>	▶ _____ <i>Appt Date</i> _____ <i>Length of Term</i>	▶ 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