

**Agency Report of:
Public Official Appointments**

A Public Document

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|---|--|---------------------------|---|
| 1. Agency Name City of Red Bluff | | | California Form 806 For Official Use Only |
| Division, Department, or Region (If Applicable) City Council | | | |
| Designated Agency Contact (Name, Title) Cheryl Smith, Deputy City Clerk | | Page <u>1</u> of <u>1</u> | Date Posted: <u>12/16/2015</u> <small>(Month, Day, Year)</small> |
| Area Code/Phone Number 530-527-2605 | E-mail csmith@cityofredbluff.org | | |

2. Appointments

| Agency Boards and Commissions | Name of Appointed Person | Appt Date and Length of Term | Per Meeting/Annual Salary/Stipend |
|---|--|---|---|
| Tehama County Transportation Commission | ▶ Name <u>Schmid, Rob</u> <small>(Last, First)</small> Alternate, if any <u>Jackson, Daniele</u> <small>(Last, First)</small> | ▶ <u>12 / 01 / 15</u> <small>Appt Date</small> ▶ <u>1 year</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"/> <u> </u> Other |
| | ▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u> / / </u> <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"/> _____ Other |
| | ▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u> / / </u> <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"/> _____ Other |
| | ▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u> / / </u> <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"/> _____ 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.

| | | | |
|--------------------------------------|--------------|-------------------|--------------------|
| | Cheryl Smith | Deputy City Clerk | 12/16/2015 |
| Signature of Agency Head or Designee | Print Name | Title | (Month, Day, Year) |

Comment: Adopted by the City Council on December 15, 2015