

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name Town of Los Gatos			California Form 806 For Official Use Only
Division, Department, or Region <i>(If Applicable)</i>			
Designated Agency Contact <i>(Name, Title)</i> Shelley Neis, Town Clerk			
Area Code/Phone Number (408) 354-6834	E-mail clerk@losgatosca.gov	Page <u>1</u> of <u>1</u>	Date Posted: <u>1/3/2020</u> <small><i>(Month, Day, Year)</i></small>

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
West Valley Sanitation District Board of Directors	▶ Name <u>Spector, Barbara</u> <small><i>(Last, First)</i></small> Alternate, if any <u>Rennie, Rob</u> <small><i>(Last, First)</i></small>	▶ <u>01 / 01 / 20</u> <small><i>Appt Date</i></small> ▶ <u>1 year</u> <small><i>Length of Term</i></small>	▶ Per Meeting: \$ <u>150.00</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> <small><i>Other</i></small>
	▶ Name _____ <small><i>(Last, First)</i></small> Alternate, if any _____ <small><i>(Last, First)</i></small>	▶ <u> / / </u> <small><i>Appt Date</i></small> ▶ _____ <small><i>Length of Term</i></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"/> <u> </u> <small><i>Other</i></small>
	▶ Name _____ <small><i>(Last, First)</i></small> Alternate, if any _____ <small><i>(Last, First)</i></small>	▶ <u> / / </u> <small><i>Appt Date</i></small> ▶ _____ <small><i>Length of Term</i></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"/> <u> </u> <small><i>Other</i></small>
	▶ Name _____ <small><i>(Last, First)</i></small> Alternate, if any _____ <small><i>(Last, First)</i></small>	▶ <u> / / </u> <small><i>Appt Date</i></small> ▶ _____ <small><i>Length of Term</i></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"/> <u> </u> <small><i>Other</i></small>

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.

	Shelley Neis	Town Clerk	01/03/2020
<small><i>Signature of Agency Head or Designee</i></small>	<small><i>Print Name</i></small>	<small><i>Title</i></small>	<small><i>(Month, Day, Year)</i></small>

Comment: _____