

**Agency Report of:
Public Official Appointments**

A Public Document

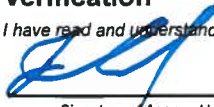
1. Agency Name Foothill Transit		California Form 806 For Official Use Only	
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Christina Lopez			
Area Code/Phone Number (626) 931-7204	E-mail clopez@foothilltransit.org	Page <u>1</u> of <u>2</u>	Date Posted: <u>06/02/2017</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
Foothill Transit Executive Board - Cluster 1	▶ Name <u>Calaycay, Corey</u> <small>(Last, First)</small> Alternate, if any <u>Pacheco, Bob</u> <small>(Last, First)</small>	▶ <u>05 / 13 / 15</u> <small>Appt Date</small> ▶ <u>3 years</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>152.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> \$3,000-\$11,000 <small>Other</small>
Foothill Transit Executive Board - Cluster 2	▶ Name <u>Warshaw, Corey</u> <small>(Last, First)</small> Alternate, if any <u>Boyer, Gary</u> <small>(Last, First)</small>	▶ <u>05 / 26 / 17</u> <small>Appt Date</small> ▶ <u>3 years</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>\$152.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> \$3,000-\$11,000 <small>Other</small>
Foothill Transit Executive Board - Cluster 3	▶ Name <u>Sternquist, Cynthia</u> <small>(Last, First)</small> Alternate, if any <u>Barakat, Richard</u> <small>(Last, First)</small>	▶ <u>05 / 26 / 17</u> <small>Appt Date</small> ▶ <u>3 years</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>\$152.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> \$3,000-\$11,000 <small>Other</small>
Foothill Transit Executive Board - Cluster 4	▶ Name <u>Herrera, Carol</u> <small>(Last, First)</small> Alternate, if any <u>Munoz, Valerie</u> <small>(Last, First)</small>	▶ <u>05 / 13 / 15</u> <small>Appt Date</small> ▶ <u>3 years</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>\$152.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> \$3,000-\$11,000 <small>Other</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.



Signature of Agency Head or Designee

Kevin Parks McDonald

Print Name

Deputy Executive Director

Title

06/02/17

(Month, Day, Year)

Comment: _____

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

1. Agency Name

Foothill Transit

Date Posted: 06/02/2017
(Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Foothill Transit Executive Board - Cluster 5	▶ Name <u>Pedroza, Sam</u> <i>(Last, First)</i> Alternate, if any <u>De La Torre, Michael</u> <i>(Last, First)</i>	▶ <u>05 / 12 / 16</u> <i>Appt Date</i> ▶ <u>3 years</u> <i>Length of Term</i>	▶ Per Meeting: \$ <u>\$152.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> \$3,000-\$11,000 <i>Other</i>
	▶ 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"/> _____ <i>Other</i>
	▶ 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"/> _____ <i>Other</i>
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	▶ 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"/> _____ <i>Other</i>