

**Agency Report of:
Public Official Appointments**

A Public Document


1. Agency Name City of Salinas		RECEIVED CITY OF SALINAS JUL 29 2024 CITY CLERK	California Form 806 <small>For Official Use Only</small>
Division, Department, or Region (If Applicable) City Council			Date Posted: 7/29/2024 <small>(Month, Day, Year)</small>
Designated Agency Contact (Name, Title) Patricia M. Barajas		Page 1 of 2	
Area Code/Phone Number (831) 757-7381	E-mail ccclerk@ci.salinas.ca.us		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Associationa of Monterey Bay Area Governments (AMBAG)	▶ Name <u>Valenzuela, Jesus</u> <small>(Last, First)</small> Alternate, if any <u>Barrera, Tony</u> <small>(Last, First)</small>	▶ <u>6/25/2024</u> <small>Appt Date</small> ▶ Expires <u>1/2025</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>50</u> ▶ 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
Central Coast Community Energy (3CE)	▶ Name <u>Valenzuela, Jesus</u> <small>(Last, First)</small> Alternate, if any <u>Barrera, Tony</u> <small>(Last, First)</small>	▶ <u>6/25/2024</u> <small>Appt Date</small> ▶ Expires <u>1/2025</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</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"/> Other
Community Human Services (CHS)	▶ Name <u>Rocha, Anthony</u> <small>(Last, First)</small> Alternate, if any <u>Sandoval, Andrew</u> <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ Expires <u>1/2025</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>0</u> ▶ 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
Salinas Valley Basin Groundwater Sustainability Agency (SVBGSA)	▶ Name <u>Rocha, Anthony</u> <small>(Last, First)</small> Alternate, if any <u>Gonzalez, Carla</u> <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ Expires <u>1/2025</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</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"/> 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.

	Patricia M. Barajas <small>Print Name</small>	City Clerk <small>Title</small>	07/29/2024 <small>(Month, Day, Year)</small>
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Comment: _____

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Clear

FPPC Form 806 (1/18)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

