

Agency Report of:
Public Official Appointments

COPY

A Public Document

1. Agency Name		<div style="border: 1px solid black; padding: 5px; text-align: center;"> California Form 806 For Official Use Only </div>	
City of Benicia			
Division, Department, or Region (If Applicable)			
Benicia City Council			
Designated Agency Contact (Name, Title)		Date Posted: <u>10/17/12</u> <small>(Month, Day, Year)</small>	
Lisa Wolfe, City Clerk			
Area Code/Phone Number	E-mail	Page <u>1</u> of <u>1</u>	
707-746-4200	lwolfe@ci.benicia.ca.us		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Solano Transportation Authority (STA)	Name <u>Patterson, Elizabeth</u> <small>(Last, First)</small> Alternate, if any <u>Schwartzman, Alan</u> <small>(Last, First)</small>	<u>12 / 20 / 11</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"/> Other
Solano Water Authority/Solano County Water Agency (SWA/SCWA)	Name <u>Patterson, Elizabeth</u> <small>(Last, First)</small> Alternate, if any <u>None</u> <small>(Last, First)</small>	<u>12 / 20 / 11</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"/> Other
SolTrans Joint Powers of Authority	Name <u>Patterson, Elizabeth</u> <small>(Last, First)</small> Alternate, if any <u>Schwartzman, Alan</u> <small>(Last, First)</small>	<u>12 / 20 / 11</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"/> Other
SolTrans Joint Powers of Authority	Name <u>Hughes, Mark</u> <small>(Last, First)</small> Alternate, if any <u>n/a</u> <small>(Last, First)</small>	<u>12 / 20 / 11</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"/> 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.

 Signature of Agency Head or Designee	Lisa Wolfe Print Name	City Clerk Title	10/17/12 (Month, Day, Year)
--	--------------------------	---------------------	--------------------------------

Comment: ** Alternates usually attend 0-3 meetings per year.

**Public Official Appointments to Outside Agency Boards & Commissions
2011-2012**

Outside Agency Commissions/Boards	# Meetings Per Year	Per Meeting Salary/ Stipend	Estimated Annual Salary/ Stipend
SOLANO TRANSPORTATION AUTHORITY (STA)	12/year	\$100	\$1,000 - \$2,000
SOLTRANS JOINT POWERS AUTHORITY	12/year	\$100	\$1,000 - \$2,000
SOLANO WATER AUTHORITY/SOLANO COUNTY WATER AGENCY (SWA/SCWA)	12/year	\$100	\$1,000 - \$2,000
TRI-CITY & COUNTY REGIONAL PARKS & OPEN SPACE	2/year	\$0	\$0
ABAG	2/year	\$0	\$0
LEAGUE OF CALIFORNIA CITIES	6/year	\$0	\$0
SOLANO EDC BOARD OF DIRECTORS	4/year	\$0	\$0