

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name			California Form 806
Tulare County			For Official Use Only
Division, Department, or Region (If Applicable)			
Board of Supervisors			
Designated Agency Contact (Name, Title)			
Michelle Baldwin, Chief Clerk			
Area Code/Phone Number	E-mail	Page <u>1</u> of <u>1</u>	Date Posted: <u>2/21/14</u> <small>(Month, Day, Year)</small>
(559) 636-5000	mbaldwin@co.tulare.ca.us		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Chairman, Board of Supervisors	▶ Name <u>Cox, Phillip</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 07 / 14</u> <small>Appt Date</small> <u>1 Year</u> <small>Length of Term</small>	▶ Per Meeting: \$ _____ <u>Annually</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"/> <u>\$7,883.98</u> <small>Other</small>
Vice Chairman, Board of Supervisors	▶ Name <u>Worthley, J. Steven</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 07 / 14</u> <small>Appt Date</small> <u>1 Year</u> <small>Length of Term</small>	▶ Per Meeting: \$ _____ <u>Annually</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"/> <u>\$3,942.12</u> <small>Other</small>
San Joaquin Valley Unified Air Pollution Control District	▶ Name <u>Worthley, J. Steven</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 01 / 03</u> <small>Appt Date</small> <u>Tenure</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"/> _____ <small>Other</small>
Tulare County Employees' Retirement Board	▶ Name <u>Cox, Phillip</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 11 / 11</u> <small>Appt Date</small> <u>3 Years</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"/> _____ <small>Other</small>

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.

 <small>Signature of Agency Head or Designee</small>	<u>Jean M. Rousseau</u> <small>Print Name</small>	<u>County Administrative Officer</u> <small>Title</small>	<u>02/06/2014</u> <small>(Month, Day, Year)</small>
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Comment: _____