

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name FALLBROOK PUBLIC UTILITY DISTRICT			California Form 806 For Official Use Only
Division, Department, or Region (If Applicable) BOARD OF DIRECTORS			
Designated Agency Contact (Name, Title) MARY LOU WEST, SECRETARY			
Area Code/Phone Number (760) 999-2704	E-mail MARYLOUB@FPUD.COM	Page <u>1</u> of <u>2</u>	Date Posted: <u>01/29/2019</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
FALLBROOK PUBLIC UTILITY DISTRICT, FISCAL POLICY & INSURANCE COMMITTEE	▶ Name <u>GEBHART, AL</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 10 / 18</u> <small>Appt Date</small> <u>1 YEAR</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
FALLBROOK PUBLIC UTILITY DISTRICT, FISCAL POLICY & INSURANCE COMMITTEE	▶ Name <u>WOLK, CHARLEY</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 10 / 18</u> <small>Appt Date</small> <u>1 YEAR</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
FALLBROOK PUBLIC UTILITY DISTRICT, PERSONNEL COMMITTEE	▶ Name <u>MCDUGAL, DON</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 10 / 18</u> <small>Appt Date</small> <u>1 YEAR</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</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
FALLBROOK PUBLIC UTILITY DISTRICT, PERSONNEL COMMITTEE	▶ Name <u>DEMEO, JENNIFER</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 10 / 18</u> <small>Appt Date</small> <u>1 YEAR</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</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

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.

 <small>Signature of Agency Head or Designee</small>	<u>MARY LOU WEST</u> <small>Print Name</small>	<u>SECRETARY</u> <small>Title</small>	<u>01/29/2019</u> <small>(Month, Day, Year)</small>
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Comment: _____

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

1. Agency Name FALLBROOK PUBLIC UTILITY DISTRICT	Date Posted: <u>01/29/2019</u> <small>(Month, Day, Year)</small>
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2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
FALLBROOK PUBLIC UTILITY DISTRICT, ENGINEERING & OPERATIONS COMMITTEE	▶ Name <u>WOLK, CHARLEY</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 28 / 19</u> <small>Appt Date</small> <u>1 YEAR</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
FALLBROOK PUBLIC UTILITY DISTRICT, ENGINEERING & OPERATIONS COMMITTEE	▶ Name <u>ENDTER, KEN</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 28 / 19</u> <small>Appt Date</small> <u>1 YEAR</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
ASSOCIATION OF CALIFORNIA WATER AGENCIES JOINT POWERS INSURANCE AUTHORITY BOARD OF DIRECTORS	▶ Name <u>DEMEO, JENNIFER</u> <small>(Last, First)</small> Alternate, if any <u>ENDTER, KEN</u> <small>(Last, First)</small>	▶ <u>01 / 28 / 19</u> <small>Appt Date</small> <u>(until replaced)</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</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
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u> / / </u> <small>Appt Date</small> _____ <small>Length of Term</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"/> Other
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u> / / </u> <small>Appt Date</small> _____ <small>Length of Term</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"/> Other
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u> / / </u> <small>Appt Date</small> _____ <small>Length of Term</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"/> Other