

**Agency Report of:  
Public Official Appointments**

**A Public Document**

<b>1. Agency Name</b>		<b>California Form 806</b>	<b>For Official Use Only</b>
FALLBROOK PUBLIC UTILITY DISTRICT			
<b>Division, Department, or Region (If Applicable)</b>			
BOARD OF DIRECTORS			
<b>Designated Agency Contact (Name, Title)</b>			
LAUREN ECKERT, EXECUTIVE ASSISTANT/BOARD SECRETARY			
<b>Area Code/Phone Number</b>	<b>E-mail</b>	Page <u>1</u> of <u>3</u>	<b>Date Posted:</b> 02/11/2021 <small>(Month, Day, Year)</small>
760-999-2704	LECKERT@FPUD.COM		

**2. Appointments**

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
FPUD FISCAL POLICY & INSURANCE COMMITTEE	▶ Name <u>WOLK, CHARLEY</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 25 / 21</u> <small>Appt Date</small>  <u>12/2021</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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>
FPUD FISCAL POLICY & INSURANCE COMMITTEE	▶ Name <u>MCDUGAL, DON</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 25 / 21</u> <small>Appt Date</small>  <u>12//2021</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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>
FPUD ENGINEERING & OPERATIONS COMMITTEE	▶ Name <u>ENDTER, KEN</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 25 / 21</u> <small>Appt Date</small>  <u>12/2021</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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>
FPUD ENGINEERING & OPERATIONS COMMITTEE	▶ Name <u>BAXTER, DAVE</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 25 / 21</u> <small>Appt Date</small>  <u>12/2021</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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 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

LAUREN ECKERT  
Print Name

EXECUTIVE ASSISTANT/BOARD SECRETARY  
Title

02/11/2021  
(Month, Day, Year)

Comment: \_\_\_\_\_

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

<b>1. Agency Name</b> FALLBROOK PUBLIC UTILITY DISTRICT	<b>Date Posted:</b> <u>02/11/2021</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
FPUD PERSONNEL COMMITTEE	▶ Name <u>MCDUGAL, DON</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 25 / 21</u> <small>Appt Date</small>  <u>12/2021</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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"/> _____ <small>Other</small>
FPUD PERSONNEL COMMITTEE	▶ Name <u>DEMEO, JENNIFER</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 25 / 21</u> <small>Appt Date</small>  <u>12/2021</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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"/> _____ <small>Other</small>
FPUD AD HOC COMMUNITY BENEFITS PROGRAM	▶ Name <u>MCDUGAL, DON</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>05 / 29 / 18</u> <small>Appt Date</small>  <u>UNTIL DONE</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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"/> _____ <small>Other</small>
FPUD AD HOC COMMUNITY BENEFITS PROGRAM	▶ Name <u>DEMEO, JENNIFER</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>05 / 29 / 18</u> <small>Appt Date</small>  <u>UNTIL DONE</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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"/> _____ <small>Other</small>
FPUD AD HOC DETACHMENT FROM SDCWA AND ANNEXATION TO EMWD	▶ Name <u>MCDUGAL, DON</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>03 / 25 / 19</u> <small>Appt Date</small>  <u>UNTIL DONE</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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"/> _____ <small>Other</small>
FPUD AD HOC DETACHMENT FROM SDCWA AND ANNEXATION TO EMWD	▶ Name <u>WOLK, CHARLEY</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>03 / 25 / 19</u> <small>Appt Date</small>  <u>UNTIL DONE</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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"/> _____ <small>Other</small>

**Agency Report of:  
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Continuation Sheet**

<b>1. Agency Name</b> FALLBROOK PUBLIC UTILITY DISTRICT	<b>Date Posted:</b> <u>02/11/2021</u> (Month, Day, Year)
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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
FPUD AD HOC 100 YEAR ANNIVERSARY PLAN	▶ Name <u>MCDUGAL, DON</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 07 / 20</u> <small>Appt Date</small>  UNTIL DONE <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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"/> _____ <small>Other</small>
FPUD AD HOC 100 YEAR ANNIVERSARY PLAN	▶ Name <u>BAXTER, DAVE</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 07 / 20</u> <small>Appt Date</small>  UNTIL DONE <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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"/> _____ <small>Other</small>
FUTURE AD HOC COMMITTEES AS ESTABLISHED FROM TIME TO TIME BY THE BOARD (PLACEHOLDER)	▶ Name _____ <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ _____ / _____ / _____ <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"/> _____ <small>Other</small>
ASSOCIATION OF CALIFORNIA WATER AGENCIES JOIN POWERS INSURANCE AUTHORITY BOARD OF DIRECTORS	▶ Name <u>DEMEO, JENNIFER</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 28 / 19</u> <small>Appt Date</small>  UNTIL REPLACED <small>Length of Term</small>	▶ Per Meeting: \$ <u>110.25</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"/> _____ <small>Other</small>
	▶ Name _____ <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ _____ / _____ / _____ <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"/> _____ <small>Other</small>
	▶ Name _____ <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ _____ / _____ / _____ <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"/> _____ <small>Other</small>