

**Agency Report of:  
Public Official Appointments**

**A Public Document**


<b>1. Agency Name</b> Castroville Community Services District			<b>California Form 806</b>
Division, Department, or Region (If Applicable)			For Official Use Only
Designated Agency Contact (Name, Title) J. Eric Tynan, General Manager			<b>Date Posted:</b> 12-17-2018 <small>(Month, Day, Year)</small>
Area Code/Phone Number 831-633-2560	E-mail eric@castrovillecsd.org	Page <u>1</u> of <u>1</u>	

**2. Appointments**

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Monterey One Water	▶ Name <u>Stefani, Ronald J</u> <small>(Last, First)</small>  Alternate, if any <u>James Cochran</u> <small>(Last, First)</small>	▶ <u>12 / 15 / 09</u> <small>Appt Date</small>  ▶ <u>11/2020</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
Salinas Valley Groundwater Sustainability Agency JPA	▶ Name <u>Stefani, Ronald J</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>09 / 19 / 17</u> <small>Appt Date</small>  ▶ <u>11/2020</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
	▶ 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"/> Other
	▶ 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"/> 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.*

	J. Eric Tynan	General Manager	12/17/2018
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

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