

**Agency Report of:  
Public Official Appointments**

**A Public Document**

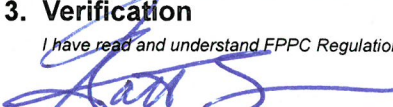
<b>1. Agency Name</b> City of Pittsburg		<b>CITY CLERK</b>  DEC 20 2019	<b>California Form 806</b>
Division, Department, or Region (If Applicable) City Council			For Official Use Only
Designated Agency Contact (Name, Title) Garrett Evans, City Manager			<b>Date Posted:</b> 12/20/19 <small>(Month, Day, Year)</small>
Area Code/Phone Number 925-252-4034	E-mail gevans@ci.pittsburg.ca.us	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
Delta Diablo	▶ Name <u>Juan Banales</u> <small>(Last, First)</small>  Alternate, if any <u>Shanelle Scales-Preston</u> <small>(Last, First)</small>	▶ <u>12 / 16 / 19</u> <small>Appt Date</small>  ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>209</u>  ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Tri-Delta Transit	▶ Name <u>Shanelle Scales-Preston</u> <small>(Last, First)</small>  Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 16 / 19</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
Tri-Delta Transit	▶ Name <u>Marilyn Craft</u> <small>(Last, First)</small>  Alternate, if any <u>Jelani Killings</u> <small>(Last, First)</small>	▶ <u>12 / 16 / 19</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
	▶ 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.*

 Signature of Agency Head or Designee	Garrett Evans Print Name	City Manager Title	12/20/19 (Month, Day, Year)
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Comment: \_\_\_\_\_