

Agency Report of: Public Official Appointments

A Public Document

1. Agency Name

City of Tracy

Division, Department, or Region (If Applicable)

City Clerk's Office

Designated Agency Contact (Name, Title)

Adrienne Richardson

Area Code/Phone Number

209-831-6105

E-mail

adrienne.richardson@cityoftracy.org

California Form 806

For Official Use Only

JAN 16 2025

CITY CLERK
TRACY
CA

Date Posted:

(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
Ava Community Energy Authority	<p>► Name <u>Nygard, Dotty</u> (Last, First)</p> <p>Alternate, if any <u>Bedolla, Mateo</u> (Last, First)</p>	<p>► <u>1/7/2025</u> Appt Date</p> <p>► <u>1 Year</u> Length of Term</p>	<p>► Per Meeting: \$ <u>\$128.00</u></p> <p>► Estimated Annual:</p> <p><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ Other</p>
San Joaquin Council of Governments	<p>► Name <u>Arriola, Dan</u> (Last, First)</p> <p>Alternate, if any <u>Nygard, Dotty</u> (Last, First)</p>	<p>► <u>1/7/2025</u> Appt Date</p> <p>► <u>1 Year</u> Length of Term</p>	<p>► Per Meeting: \$ <u>\$100.00</u></p> <p>► Estimated Annual:</p> <p><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ Other</p>
	<p>► Name _____ (Last, First)</p> <p>Alternate, if any _____ (Last, First)</p>	<p>► _____ Appt Date</p> <p>► _____ Length of Term</p>	<p>► Per Meeting: \$ _____</p> <p>► Estimated Annual:</p> <p><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ Other</p>
	<p>► Name _____ (Last, First)</p> <p>Alternate, if any _____ (Last, First)</p>	<p>► _____ Appt Date</p> <p>► _____ Length of Term</p>	<p>► Per Meeting: \$ _____</p> <p>► Estimated Annual:</p> <p><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ Other</p>

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

Midori Lichtwardt

Print Name

City Manager

Title

01/16/2025

(Month, Day, Year)

Comment: _____

Print

Clear