

**Agency Report of:
Public Official Appointments**

A Public Document


1. Agency Name City of Carlsbad		California Form 806	For Official Use Only
Division, Department, or Region (If Applicable) City Clerk Services			
Designated Agency Contact (Name, Title) Sheila Cobian, Director of Legislative and Constituent Services			
Area Code/Phone Number 442-339-2808	E-mail clerk@carlsbadca.gov	Page <u>1</u> of <u>2</u>	Date Posted: <u>12/15/2023</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
SANDAG Board of Directors	▶ Name <u>Melanie Burkholder</u> <small>(Last, First)</small> Alternate, if any <u>1st: Priya Bhat-Patel</u> <small>(Last, First)</small>	▶ <u>12/12/2023</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150</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"/> <u>Other</u>
North County Transit District Board of Directors	▶ Name <u>Priya Bhat-Patel</u> <small>(Last, First)</small> Alternate, if any <u>Carolyn Luna</u> <small>(Last, First)</small>	▶ <u>12/12/2023</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>50</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"/> <u>Other</u>
North County Dispatch Joint Powers Authority	▶ Name <u>Teresa Acosta</u> <small>(Last, First)</small> Alternate, if any <u>Melanie Burkholder</u> <small>(Last, First)</small>	▶ <u>12/12/2023</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>50</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"/> <u>Other</u>
Encina Wastewater Authority Board of Directors/Encina Joint Powers JAC	▶ Name <u>Keith Blackburn</u> <small>(Last, First)</small> Alternate, if any <u>Teresa Acosta</u> <small>(Last, First)</small>	▶ <u>12/12/2023</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>229.16</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>2,750</u> <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.


Sheila Cobian
Director of Legislative and Con
12/15/2023

Signature of Agency Head or Designee
Print Name
Title
(Month, Day, Year)

Comment: _____

Print

Clear

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

1. Agency Name City of Carlsbad	Date Posted: <u>12/15/2023</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
Encina Wastewater Authority Board of Directors/Encina Joint Powers JAC	▶ Name <u>Carolyn Luna</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12/12/2023</u> <small>Appt Date</small> <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>229.16</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>2,750</u> <small>Other</small>
San Diego County Water Authority (SDCWA) Board of Directors	▶ Name <u>Teresa Acosta</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12/12/2023</u> <small>Appt Date</small> <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150</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>
SANDAG Public Safety Policy Advisory Committee	▶ Name <u>Keith Blackburn</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12/12/2023</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"/> _____ <small>Other</small>
SANDAG Executive Policy Advisory Committee	▶ Name _____ <small>(Last, First)</small> Alternate, if any <u>Melanie Burkholder</u> <small>(Last, First)</small>	▶ <u>12/12/2023</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"/> _____ <small>Other</small>
SANDAG Board of Directors	▶ Name _____ <small>(Last, First)</small> Alternate, if any <u>2nd: Keith Blackburn</u> <small>(Last, First)</small>	▶ <u>12/12/2023</u> <small>Appt Date</small> <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150</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>
	▶ 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>