

**Agency Report of:
Public Official Appointments**

A Public Document

| | | | |
|--|---------------------------------|---|---|
| 1. Agency Name CENTRAL CONTRA COSTA SANITARY DISTRICT | | | California Form 806 For Official Use Only |
| Division, Department, or Region (If Applicable) SECRETARY OF THE DISTRICT | | | Page <u>1</u> of <u>5</u> |
| Designated Agency Contact (Name, Title) KATIE YOUNG | | | |
| Area Code/Phone Number (925) 229-7303 | E-mail kyoung@centralsan.org | Date Posted: 01/03/22 <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 |
|-------------------------------|--|--|--|
| Administration Committee | ▶ Name <u>Pilecki, Tad</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ _____ <u>185</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"/> _____ <small>Other</small> |
| " | ▶ Name <u>Lauritzen, Mariah</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ _____ <u>185</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"/> _____ <small>Other</small> |
| Engineering & Operations | ▶ Name <u>Lauritzen, Mariah</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ _____ <u>185</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"/> _____ <small>Other</small> |
| " | ▶ Name <u>Hockett, Barbara</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ _____ <u>185</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"/> _____ <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.

| | | | |
|---|---------------------------|---------------------------|-----------------------------------|
| <i>Katie Young</i> | Katie Young | Secretary of the District | 01/03/22 |
| <small>Signature of Agency Head or Designee</small> | <small>Print Name</small> | <small>Title</small> | <small>(Month, Day, Year)</small> |

Comment: _____

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

| | |
|---|--|
| 1. Agency Name CENTRAL CONTRA COSTA SANITARY DISTRICT | Date Posted: <u>01/03/22</u> <i>(Month, Day, Year)</i> |
|---|--|

2. Appointments

| Agency Boards and Commissions | Name of Appointed Person | Appt Date and Length of Term | Per Meeting/Annual Salary/Stipend |
|--|---|--|--|
| Finance Committee | ▶ Name <u>McGill, Michael</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 01 / 22</u> <i>Appt Date</i> ▶ <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ <u>185</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"/> _____ <i>Other</i> |
| " | ▶ Name <u>Williams, David</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 01 / 22</u> <i>Appt Date</i> ▶ <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ <u>185</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"/> _____ <i>Other</i> |
| Real Estate, Environmental & Planning Committee | ▶ Name <u>Hockett, Barbara</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 01 / 22</u> <i>Appt Date</i> ▶ <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ <u>185</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"/> _____ <i>Other</i> |
| " | ▶ Name <u>Williams, David</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 01 / 22</u> <i>Appt Date</i> ▶ <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ <u>185</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"/> _____ <i>Other</i> |
| BOARD LIAISON TO: Division 1: Clayton, Concord, Pleasant Hill | ▶ Name <u>Pilecki, Tad</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 01 / 22</u> <i>Appt Date</i> ▶ <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ <u>185</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"/> _____ <i>Other</i> |
| BOARD LIAISON TO: Division 2: Lafayette, Moraga, Orinda | ▶ Name <u>McGill, Michael</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 01 / 22</u> <i>Appt Date</i> ▶ <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ <u>185</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"/> _____ <i>Other</i> |

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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 |
|---|--|--|--|
| BOARD LIAISON TO: Division 3: Walnut Creek | ▶ Name <u>Williams, David</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>185</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> |
| BOARD LIAISON TO: Division 4: Alamo, Danville, Contra Costa County | ▶ Name <u>Hockett, Barbara</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>185</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> |
| BOARD LIAISON TO: Division 5: Martinez, Pacheco, San Ramon | ▶ Name <u>Lauritzen, Mariah</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>185</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> |
| REPRESENTATIVE TO: California Special Districts Association (CSDA) - Contra Costa Chapter | ▶ Name <u>Hockett, Barbara</u> <small>(Last, First)</small> Alternate, if any <u>McGill, Michael</u> <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>185</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> |
| REPRESENTATIVE TO: Contra Costa Water District (CCWD) | ▶ Name <u>Williams, David</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>185</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> |
| REPRESENTATIVE TO: Dublin San Ramon Services District (DSRSD) | ▶ Name <u>McGill, Michael</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small> | ▶ <u>01 / 01 / 22</u> <small>Appt Date</small> <u>12 months</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>185</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> |

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1. Agency Name

CENTRAL CONTRA COSTA SANITARY DISTRICT

Date Posted: 01/03/22
(Month, Day, Year)

2. Appointments

| Agency Boards and Commissions | Name of Appointed Person | Appt Date and Length of Term | Per Meeting/Annual Salary/Stipend |
|---|--|---|---|
| <p>REPRESENTATIVE TO: East Bay Municipal Utility District (EBMUD)</p> | <p>▶ Name <u>Hockett, Barbara</u> <i>(Last, First)</i></p> <p>Alternate, if any _____ <i>(Last, First)</i></p> | <p>▶ <u>01 / 01 / 22</u> <i>Appt Date</i></p> <p><u>12 months</u> <i>Length of Term</i></p> | <p>▶ Per Meeting: \$ _____ <u>185</u></p> <p>▶ 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"/> _____ <i>Other</i></p> |
| <p>REPRESENTATIVE TO: East Bay Regional Parks District (EBRPD)</p> | <p>▶ Name <u>McGill, Michael</u> <i>(Last, First)</i></p> <p>Alternate, if any _____ <i>(Last, First)</i></p> | <p>▶ <u>01 / 01 / 22</u> <i>Appt Date</i></p> <p><u>12 months</u> <i>Length of Term</i></p> | <p>▶ Per Meeting: \$ _____ <u>185</u></p> <p>▶ 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"/> _____ <i>Other</i></p> |
| <p>REPRESENTATIVE TO: Contra Costa Local Agency Formation Commission (LAFCO)</p> | <p>▶ Name <u>Pilecki, Tad</u> <i>(Last, First)</i></p> <p>Alternate, if any <u>Hockett, Barbara</u> <i>(Last, First)</i></p> | <p>▶ <u>01 / 01 / 22</u> <i>Appt Date</i></p> <p><u>12 months</u> <i>Length of Term</i></p> | <p>▶ Per Meeting: \$ _____ <u>185</u></p> <p>▶ 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"/> _____ <i>Other</i></p> |
| <p>REPRESENTATIVE TO: Mt. View Sanitary District (MVSD)</p> | <p>▶ Name <u>Lauritzen, Mariah</u> <i>(Last, First)</i></p> <p>Alternate, if any _____ <i>(Last, First)</i></p> | <p>▶ <u>01 / 01 / 22</u> <i>Appt Date</i></p> <p><u>12 months</u> <i>Length of Term</i></p> | <p>▶ Per Meeting: \$ _____ <u>185</u></p> <p>▶ 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"/> _____ <i>Other</i></p> |
| <p>REPRESENTATIVE TO: Pleasant Hill Recreation and Park District (PHR&PD)</p> | <p>▶ Name <u>Pilecki, Tad</u> <i>(Last, First)</i></p> <p>Alternate, if any _____ <i>(Last, First)</i></p> | <p>▶ <u>01 / 01 / 22</u> <i>Appt Date</i></p> <p><u>12 months</u> <i>Length of Term</i></p> | <p>▶ Per Meeting: \$ _____ <u>185</u></p> <p>▶ 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"/> _____ <i>Other</i></p> |
| <p>REPRESENTATIVE TO: Valley Water (formerly Santa Clara Valley Water District)</p> | <p>▶ Name <u>Williams, David</u> <i>(Last, First)</i></p> <p>Alternate, if any _____ <i>(Last, First)</i></p> | <p>▶ <u>01 / 01 / 22</u> <i>Appt Date</i></p> <p><u>12 months</u> <i>Length of Term</i></p> | <p>▶ Per Meeting: \$ _____ <u>185</u></p> <p>▶ 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"/> _____ <i>Other</i></p> |

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1. Agency Name

CENTRAL CONTRA COSTA SANITARY DISTRICT

Date Posted: 01/03/22
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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 |
|---|--|--|--|
| REPRESENTATIVE TO: State Water Resources Control Board (SWRCB) | ▶ Name <u>Pilecki, Tad</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 01 / 22</u> <i>Appt Date</i> <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ _____ <u>185</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"/> _____ <i>Other</i> |
| REPRESENTATIVE TO: Bay Area Air Quality Management District (BAAQMD) | ▶ Name <u>Lauritzen, Mariah</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>01 / 01 / 22</u> <i>Appt Date</i> <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ _____ <u>185</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"/> _____ <i>Other</i> |
| Diversity, Equity and Inclusion Ad Hoc Committee | ▶ Name <u>McGill, Michael</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>08 / 05 / 21</u> <i>Appt Date</i> <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ _____ <u>185</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"/> _____ <i>Other</i> |
| Diversity, Equity and Inclusion Ad Hoc Committee | ▶ Name <u>Williams, David</u> <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i> | ▶ <u>08 / 05 / 21</u> <i>Appt Date</i> <u>12 months</u> <i>Length of Term</i> | ▶ Per Meeting: \$ _____ <u>185</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"/> _____ <i>Other</i> |
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