Agency Report of:
Public Official Appointments

A Public Document

1. Agency Name

CITY OF OXNARD

Division, Department, or Region *(If Applicable)*

Designated Agency Contact *(Name, Title)*

DANIEL MARTINEZ, CITY CLERK

Area Code/Phone Number	E-mail
805-385-7803	daniel.martinez@ci.oxnard.ca.us

California Form **806**

For Official Use Only

Date Posted: 04/15/2013 *(Month, Day, Year)*

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
VENTURA COUNTY REGIONAL SANITATION DISTRICT	Name: Flynn, Tim *(Last, First)* Alternate, if any: Padilla, Dorina *(Last, First)*	12 / 11 / 12 *Appt Date* 2 Years *Length of Term*	Per Meeting: $ 186.00 Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☒ 4092.00 *Other*
OXNARD AIRPORT AUTHORITY	Name: Padilla, Dorina / Flynn, Tim *(Last, First)* Alternate, if any: Ramirez, Carmen *(Last, First)*	12 / 11 / 12 *Appt Date* 2 Years *Length of Term*	Per Meeting: $ 50.00 Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☒ $1,001-$2,000 ☐ *Other*
VENTURA COUNTY TRANSPORTATION COMMISSION	Name: MacDonald, Bryan *(Last, First)* Alternate, if any: *(Last, First)*	12 / 04 / 12 *Appt Date* *Length of Term*	Per Meeting: $ 100.00 Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☒ $1,001-$2,000 ☐ *Other*
GOLD COAST TRANSIT	Name: MacDonald, Bryan *(Last, First)* Alternate, if any: Ramirez, Carmen *(Last, First)*	12 / 11 / 12 *Appt Date* 2 Years *Length of Term*	Per Meeting: $ 100.00 Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☒ $1,001-$2,000 ☐ *Other*

3. Verification

I have read and understand FPPC Regulation 18705.5. 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	Daniel Martinez *Print Name*	City Clerk *Title*	04/15/13 *(Month, Day, Year)*

Comment:

Agency Report of:
Public Official Appointments
Continuation Sheet

California Form 806
A Public Document

1. Agency Name
CITY OF OXNARD

Date Posted: 04/15/2013 (Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
SOUTHERN CALIFIORNIA ASSOCIATION OF GOVERNMENTS	Name: NONE AT THIS TIME (Last, First) Alternate, if any: Flynn, Tim (Last, First)	12 / 11 / 12 Appt Date 2 Years Length of Term	Per Meeting: $ 120.00 Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☒ $1,001-$2,000 ☐ Other
OXNARD HOUSING AUTHORITY	Name: Flynn, Tim/Ramirez, Carmen, (Last, First) Alternate, if any: (Last, First)	12 / 04 / 12 Appt Date 2 Years Length of Term	Per Meeting: $ 50.00 Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☒ $1,001-$2,000 ☐ Other
OXNARD HOUSING AUTHORITY	Name: MacDonald, Bryan/Padilla, Dorina (Last, First) Alternate, if any: (Last, First)	12 / 04 / 12 Appt Date 4 Years Length of Term	Per Meeting: $ 50.00 Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☒ $1,001-$2,000 ☐ Other
	Name: (Last, First) Alternate, if any: (Last, First)	/ / Appt Date Length of Term	Per Meeting: $ Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ Other
	Name: (Last, First) Alternate, if any: (Last, First)	/ / Appt Date Length of Term	Per Meeting: $ Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ Other
	Name: (Last, First) Alternate, if any: (Last, First)	/ / Appt Date Length of Term	Per Meeting: $ Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ Other