

**Agency Report of:
Public Official Appointments**

A Public Document

| | | | |
|---|----------------------------|---------------------------|---|
| 1. Agency Name Santa Ana Watershed Project Authority | | | California Form 806 For Official Use Only |
| Division, Department, or Region (If Applicable) | | | |
| Designated Agency Contact (Name, Title) Sara Villa, Clerk of the Board | | | |
| Area Code/Phone Number 951-354-4220 | E-mail svilla@sawpa.org | Page <u>1</u> of <u>2</u> | Date Posted: <u>3/28/2023</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 |
|---|--|---|---|
| Lake Elsinore and San Jacinto Watersheds Authority (LESJWA) Board | ▶ Name <u>Dennstedt, Brenda</u> <small>(Last, First)</small> Alternate, if any <u>Gardner, Mike</u> <small>(Last, First)</small> | ▶ <u>1/17/2023</u> <small>Appt Date</small> ▶ <u>2 years</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>250.00</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 |
| One Water One Watershed (OWOW) Steering Committee | ▶ Name <u>Dennstedt, Brenda</u> <small>(Last, First)</small> Alternate, if any <u>Harrison, T. Milford</u> <small>(Last, First)</small> | ▶ <u>1/17/2023</u> <small>Appt Date</small> ▶ <u>2 years</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>250.00</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 |
| Santa Ana River Conservancy Advisory Group | ▶ Name <u>Harrison, T. Milford</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small> | ▶ <u>4/2/2019</u> <small>Appt Date</small> ▶ <u>5 years</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>250.00</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 |
| OCSD/SAWPA Joint Policy Committee | ▶ Name <u>Slawson, David J.</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small> | ▶ <u>1/21/2020</u> <small>Appt Date</small> ▶ <u>open</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>250.00</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"/> 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.

| | | | |
|---|---------------------------|---------------------------|-----------------------------------|
|  | <u>Sara Villa</u> | <u>Clerk of the Board</u> | <u>3/28/2023</u> |
| <small>Signature of Agency Head or Designee</small> | <small>Print Name</small> | <small>Title</small> | <small>(Month, Day, Year)</small> |

Comment: _____

Print
Clear

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

| | |
|--|---|
| 1. Agency Name Santa Ana Watershed Project Authority | Date Posted: <u>3/28/2023</u> <small>(Month, Day, Year)</small> |
|--|---|

2. Appointments

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|-----------------------------------|--|--|---|
| OCSD/SAWPA Joint Policy Committee | ▶ Name <u>Harrison, T. Milford</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small> | ▶ <u>1/15/2019</u> <small>Appt Date</small> ▶ <u>open</u> <small>Length of Term</small> | ▶ Per Meeting: \$ <u>250.00</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> </u> <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> |
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