

Agency Report of: Public Official Appointments

A Public Document

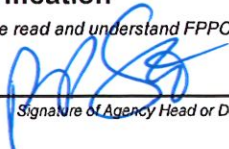
1. Agency Name CITY OF SAN MARCOS		California Form 806 For Official Use Only
Division, Department, or Region (If Applicable) CITY COUNCIL		
Designated Agency Contact (Name, Title) PHILLIP SCOLICK, CITY CLERK		
Area Code/Phone Number 760-744-1050 EXT. 3105	E-mail pscollick@san-marcos.net	Page 1 of 2 Date Posted: 02/27/2025 (Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
NORTH COUNTY DISPATCH JOINT POWERS AUTHORITY	▶ Name <u>LEBLANG, DANIELLE</u> (Last, First) Alternate, if any <u>SANNELLA, MIKE</u> (Last, First)	▶ <u>01/14/2025</u> Appt Date ▶ <u>2 YEARS</u> Length of Term	▶ Per Meeting: \$ <u>50.00</u> ▶ Estimated Annual: ☒ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☐ Other
NORTH COUNTY TRANSIT DISTRICT	▶ Name <u>SANNELLA, MIKE</u> (Last, First) Alternate, if any <u>MUSGROVE, ED</u> (Last, First)	▶ <u>01/14/2025</u> Appt Date ▶ <u>2 YEARS</u> Length of Term	▶ Per Meeting: \$ <u>150.00</u> ▶ Estimated Annual: ☒ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☐ Other
SAN DIEGO ASSOCIATION OF GOVERNMENTS	▶ Name <u>JONES, REBECCA</u> (Last, First) Alternate, if any <u>MUSGROVE, ED</u> (Last, First)	▶ <u>01/14/2025</u> Appt Date ▶ <u>2 YEARS</u> Length of Term	▶ Per Meeting: \$ <u>150.00</u> ▶ Estimated Annual: ☒ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☐ Other
SAN MARCOS FIRE PROTECTION DISTRICT	▶ Name <u>JONES, REBECCA; SANNELLA, MIKE; LEBLANG, DANIELLE; MUSGROVE, ED; NUNEZ, MARIA</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>01/14/2025</u> Appt Date ▶ _____ Length of Term	▶ Per Meeting: \$ <u>50.00</u> ▶ Estimated Annual: ☒ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☐ 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.

	PHILLIP SCOLICK	CITY CLERK	2/27/2025
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

Comment: _____

Print

Clear

FPPC Form 806 (1/18)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Agency Report of:
Public Official Appointments
Continuation Sheet

California **806**
Form
A Public Document

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1. Agency Name
CITY OF SAN MARCOS

Date Posted: 02/27/2025
(Month, Day, Year)

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