## Agency Report of: Public Official Appointments

## **A Public Document**

		DESIGNATION PROPERTY.			340 100 100	AND CHARLES AND AND A SHEET AND AND A SHEET AND	
1.	Agency Name City of Albany					California ROS	
						Form OUO	
	Division, Department, or Reg	gion (If Applicable)				For Official Use Only	
	Designated Agency Contact (Name, Title)					4	
				V.,			
	Nicole Almaguer, Assistant City Manager/City Clerk  Area Code/Phone Number   E-mail			-		Date Posted:	
5105285722				Page1 of1_		2/18/2015	
09724		nalmaguer@albanyca.org				(Month, Day, Year)	
2.	Appointments						
	Agency Boards and Commissions	Name of Appointed Person		Appt Date and Length of Term	Per Me	eting/Annual Salary/Stipend	
	Alameda County Waste Management Authority	Name Maass, Peter  (Last, First)  Alternate, if any Nason, Rochelle  (Last, First)	_ -	2 / 17 / 15 Appt Date  Per Meeting:   Estimated Annual:		ted Annual:	
		Alternate, if any(Last, First)	-   -	Length of Term	\$1,001-\$2,000 DOther		
	Alameda County Transportation Commission	Name Maass, Peter  (Last, First)  Alternate, if any Pilch, Nick  (Last, First)	_ }_	2 / 17 / 15  Appt Date  Ongoing  Length of Term	▶ Per Meeting:       \$		
		Name(Last, First)  Alternate, if any(Last, First)	_	Appt Date  Length of Term	▶ Estimat	eting: \$	
		Name(Last, First)  Alternate, if any(Last, First)	_	Appt Date  Length of Term	► Per Me  ► Estimate  □ \$0-\$1  □ \$1,00	ed Annual: ,000	
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 besi		t of my information and belief.	
	Alale Man			Assistant City Manager		2/18/15	
	Signature of Agency Head or Designe	<u> </u>		Title		(Month, Day, Year)	
Comment:							