

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name CITY OF MORENO VALLEY		California Form 806 For Official Use Only MORENO VALLEY CLERK '24 MAY 9 PM3:07	
Division, Department, or Region (If Applicable) CITY CLERK			
Designated Agency Contact (Name, Title) JANE HALSTEAD			
Area Code/Phone Number 951-413-3010	E-mail janeh@moval.org	Page <u>1</u> of <u>2</u>	Date Posted: 5/9/2024 <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
MARCH JOINT POWERS COMMISSION	▶ Name <u>CABRERA, ULISES/DELGADO, E</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>3/5/2024</u> <small>Appt Date</small> ▶ <u>12 MONTHS</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</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"/> _____ <small>Other</small>
RIVERSIDE COUNTY TRANSPORTATION COMMISSION	▶ Name <u>CABRERA ULISES</u> <small>(Last, First)</small> Alternate, if any <u>DELGADO, ED</u> <small>(Last, First)</small>	▶ <u>3/5/2024</u> <small>Appt Date</small> ▶ <u>12 MONTHS</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</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"/> _____ <small>Other</small>
RIVERSIDE COUNTY HABITAT CONSERVATION AGENCY	▶ Name <u>BARNARD, CHEYLYNDA</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>3/5/2024</u> <small>Appt Date</small> ▶ <u>12 MONTHS</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</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"/> _____ <small>Other</small>
RIVERSIDE TRANSIT AGENCY	▶ Name <u>BARNARD, CHEYLYNDA</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>3/5/2024</u> <small>Appt Date</small> ▶ <u>12 MONTHS</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</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"/> _____ <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.

JANE HALSTEAD
CITY CLERK
5/9/2024
Signature of Agency/Head or Designee
Print Name
Title
(Month, Day, Year)

Comment: _____

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

1. Agency Name CITY OF MORENO VALLEY	Date Posted: <u>5/9/2024</u> <small>(Month, Day, Year)</small>
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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
WESTERN RIVERSIDE COUNCIL OF GOVERNMENTS	▶ Name <u>BACA, SANTA-CRUZ, ELENA</u> <small>(Last, First)</small> Alternate, if any <u>CABRERA, ULISES</u> <small>(Last, First)</small>	▶ <u>3/5/2024</u> <small>Appt Date</small> ▶ <u>12 MONTHS</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</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"/> <u>Other</u>
WESTERN RIVERSIDE COUNTY REGIONAL CONSERVATION AUTHORITY	▶ Name <u>CABRERA, ULISES</u> <small>(Last, First)</small> Alternate, if any <u>DELGADO, ED</u> <small>(Last, First)</small>	▶ <u>3/5/2024</u> <small>Appt Date</small> ▶ <u>12 MONTHS</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</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"/> <u>Other</u>
MARCH JOINT POWERS COMMISSION (JPC)	▶ Name _____ <small>(Last, First)</small> Alternate, if any <u>BARNARD, CHEYLYNDA</u> <small>(Last, First)</small>	▶ <u>5/7/2024</u> <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</u> ▶ 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"/> <u>Other</u>
RIVERSIDE COUNTY HABITAT CONSERVATION AGENCY	▶ Name _____ <small>(Last, First)</small> Alternate, if any <u>DELGADO, ED</u> <small>(Last, First)</small>	▶ <u>5/7/2024</u> <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</u> ▶ 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"/> <u>Other</u>
RIVERSIDE TRANSIT AGENCY	▶ Name <u>BARNARD, CHEYLYNDA</u> <small>(Last, First)</small> Alternate, if any <u>CABRERA, ULISES</u> <small>(Last, First)</small>	▶ <u>5/7/2024</u> <small>Appt Date</small> ▶ <u>12/31/2024</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</u> ▶ 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"/> <u>Other</u>
	▶ 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"/> <u>Other</u>

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