

**Agency Report of:  
Public Official Appointments**

**A Public Document**

|   |   |  |                       |
|---|---|--|-----------------------|
| <b>1. Agency Name</b><br>City of Big Bear Lake  |   | <b>California<br/>Form 806</b>                                       | For Official Use Only |
| Division, Department, or Region (If Applicable) |   |  |                       |
| Erica Stephenson, City Clerk                    |   |  |                       |
| Designated Agency Contact (Name, Title)         |   | Date Posted:<br><u>1/7/2021</u><br><small>(Month, Day, Year)</small> |                       |
| Area Code/Phone Number<br>909-866-5831 ext. 120 | E-mail<br>cityclerk@citybigbearlake.com |  |                       |

**2. Appointments**

| Agency Boards and Commissions | Name of Appointed Person   | Appt Date and Length of Term   | Per Meeting/Annual Salary/Stipend  |
|-------------------------------|--|--|--|
| Mountain Transit              | ▶ Name <u>David Caretto</u><br><small>(Last, First)</small><br><br>Alternate, if any <u>Bynette Mote</u><br><small>(Last, First)</small> | ▶ <u>1 / 11 / 21</u><br><small>Appt Date</small><br><br>▶ <u>1 year</u><br><small>Length of Term</small> | ▶ Per Meeting: \$ <u>60</u><br><br>▶ Estimated Annual:<br><input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>        </u> Other  |
| BBARWA                        | ▶ Name <u>David Caretto/Rick Herrick</u><br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small>  | ▶ <u>1 / 11 / 21</u><br><small>Appt Date</small><br><br>▶ <u>1 year</u><br><small>Length of Term</small> | ▶ Per Meeting: \$ <u>150</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>        </u> Other |
|                               | ▶ Name _____<br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small>                              | ▶ <u>  /  /  </u><br><small>Appt Date</small><br><br>▶ _____<br><small>Length of Term</small>            | ▶ Per Meeting: \$ _____<br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>        </u> Other                 |
|                               | ▶ Name _____<br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small>                              | ▶ <u>  /  /  </u><br><small>Appt Date</small><br><br>▶ _____<br><small>Length of Term</small>            | ▶ Per Meeting: \$ _____<br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>        </u> 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.*

Erica Stephenson                      Erica Stephenson                      City Clerk                      1/7/2021  
Signature of Agency Head or Designee                      Print Name                      Title                      (Month, Day, Year)

Comment: \_\_\_\_\_