# Agency Report of:

	Agency Name Phelan Piñon Hills Communication, Department, or Reg Designated Agency Contact	gion (If Applicable)				fornia 806	
	Division, Department, or Reg	gion (If Applicable)					
	Designated Agency Contact			-	l Fo		
				1	' '	r Official Use Only	
		(Name Title)		-			
	Kim Ward						
					Date P	osted:	
2.	Area Code/Phone Number	E-mail		Page1o	f 3	07/11/22	
2.	760-868-1212	kward@pphcsd.org		ago o		(Month, Day, Year)	
	Appointments						
	Agency Boards and Name of Appointed Person			Appt Date and Length of Term	Per Meeting/An	nual Salary/Stipend	
	PPHCSD Enginering Committee	▶Name Hoffman, Kathy		12 / 16 / 20	► Per Meeting: \$  ► Estimated Annu	al:	
		Alternate, if any(Last, First)	<b>&gt;</b>	N/A Length of Term	\$0-\$1,000	\$2,001-\$3,000	
	PPHCSD Legislative Committee	►Name Hoffman, Kathy  (Last, First)  Alternate, if any (Last, First)		12 / 19 / 18 Appt Date  N/A Length of Term	► Per Meeting: \$  ► Estimated Annu  \$0-\$1,000  \$1,001-\$2,000	al: \$2,001-\$3,000	
	PPHCSD Parks, Recreation, & Street Lighting	►Name Hoffman, Kathy  (Last, First)  Alternate, if any (Last, First)	<u>}_</u>	07 / 06 / 22  Appt Date  N/A  Length of Term	► Per Meeting: \$  ► Estimated Annu  \$0-\$1,000  \$1,001-\$2,000	al: \$2,001-\$3,000	
	San Bernardino County Tax Appeals Board	▶Name Hoffman, Kathy (Last, First)  Alternate, if any (Last, First)		12 / 19 / 18 Appt Date  N/A  Length of Term	► Per Meeting: \$  ► Estimated Annu  \$0-\$1,000  \$1,001-\$2,000	\$2,001-\$3,000	
3	Verification	1	<u> </u>		<u> </u>		
		gulation 18702.5. I have verified that the appointment an	nd information	identified above is tri	ue to the best of mv i	nformation and belief.	
	Kim Ward	Kim Ward		Manager/Exec	•	07/11/22	
	Signature of Agency Head or Design		_ <u> </u>	Title	- Secretary -	(Month, Day, Year)	

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



	Page _	2 of <u>3</u>
I. Agency Name	Date Posted: _	07/11/22
Phelan Piñon Hills Community Services District	Date Posteu.	(Month, Day, Year)

### 2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
CSEA Chapter 278-Snowline	Name Kujawa, Rebecca (Last, First)  Alternate, if any (Last, First)	/ NA / Appt Date  N/A  Length of Term	▶ Per Meeting: \$       0         ▶ Estimated Annual:       \$0-\$1,000       \$2,001-\$3,000         ■ \$1,001-\$2,000       Other
Phelan Chamber of Commerce	Name Kujawa, Rebecca (Last, First)  Alternate, if any (Last, First)		▶ Per Meeting: \$       0         ▶ Estimated Annual:       \$0-\$1,000       \$2,001-\$3,000         ■ \$1,001-\$2,000       Other
PPHCSD Parks, Recreation, & Street Lighting	Name Kujawa, Rebecca  (Last, First)  Alternate, if any (Last, First)	→ 01 / 08 / 20 Appt Date  N/A Length of Term	▶ Per Meeting:       \$
PPHCSD Waste and Recycling Committee	Name Kujawa, Rebecca (Last, First)  Alternate, if any (Last, First)	▶ 12 / 16 / 20  Appt Date  N/A  Length of Term	▶ Per Meeting:       \$
PPHCSD Finance Committee	Name Kujawa, Rebecca (Last, First)  Alternate, if any (Last, First)	► 07/ 06 / 22  Appt Date  N/A  Length of Term	120  Per Meeting: \$  Estimated Annual:  \$0-\$1,000 \$2,001-\$3,000  \$1,001-\$2,000 \$  Other
PPHCSD Legislative Committee	Philips, Deborah  (Last, First)  Alternate, if any  (Last, First)	12 / 19 / 18 Appl Date  N/A  Length of Term	▶ Per Meeting: \$

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



Page	3	of	3

1.	Agency Name		07/11/22
	Phelan Piñon Hills Community Services District	Date Posted:	(Month, Day, Year)

2.	Appointments	ppointments				
	Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend		
	PPHCSD Waste and Recycling Committee	Name Philips, Deborah  (Last, First)  Alternate, if any (Last, First)	► 10 / 03 / 19  Appt Date  N/A  Length of Term	► Per Meeting: \$ 120  ► Estimated Annual:  □ \$0-\$1,000 □ \$2,001-\$3,000  ■ \$1,001-\$2,000 □		
	PPHCSD Engineering Committee	Name Roberts. Mark  (Last, First)  Alternate, if any (Last, First)	N/A Length of Term	\$1,001-\$2,000		
	PPHCSD Finance Committee	Roberts, Mark  Name (Last, First)  Alternate, if any (Last, First)	▶ 12 / 16 / 20  Appt Date  N/A  Length of Term	120  ▶ Per Meeting: \$		
		Name(Last, First)  Alternate, if any(Last, First)	Appt Date  Length of Term	▶ Per Meeting: \$		
		Name(Last, First)  Alternate, if any(Last, First)	Appt Date  Appt Date  Length of Term	▶ Per Meeting: \$		
		Name(Last, First)  Alternate, if any(Last, First)	Appt Date  Length of Term	▶ Per Meeting: \$		