



# Mendocino County

## Legislation Details (With Text)

**File #:** 20-0463      **Version:** 1      **Name:**  
**Type:** Appointment      **Status:** Consent Agenda  
**File created:** 5/21/2020      **In control:** Executive Office  
**On agenda:** 6/10/2020      **Final action:**  
**Title:** Approval of Recommended Appointments/Reappointments  
**Sponsors:**  
**Indexes:**  
**Code sections:**  
**Attachments:** 1. William Brazill - MLRCD, 2. Brent Schultz - SMEDD, 3. Yvonne Boyd - HCD

Date	Ver.	Action By	Action	Result
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**To: Board of Supervisors**

**From:** Executive Office

**Meeting Date:** June 10, 2020

**Department Contact:** Carmel J. Angelo

**Phone:** 463-4441

**Department Contact:** Atlas Pearson

**Phone:** 463-4441

**Item Type:** Consent Agenda

**Time Allocated for Item:** N/A

**Agenda Title:**

Approval of Recommended Appointments/Reappointments

**Recommended Action/Motion:**

1. Ms. Megan Allende, Community Representative, Health and Human Services Agency Advisory Board; and
2. Ms. Karen Oslund, Community Representative, Health and Human Services Agency Advisory Board.

**Previous Board/Board Committee Actions:**

The Board of Supervisors approves and/or denies recommended appointments/reappointments regularly.

**Summary of Request:**

Staff has received the listed application, verified voter status, determined that the requested position is currently vacant, and verified that the applicant fits the criteria for the requested position. In addition, Clerk of the Board staff received written support for the appointment from the individual Board/Commission and/or Supervisor for Supervisorial District position for which application has been received.

**Alternative Action/Motion:**

Do not approve the listed appointments, or deny approval to one or more of the applicants.

Supplemental Information Available Online at: N/A

**Fiscal Impact:**

Source of Funding: N/A

Current F/Y Cost: N/A

Budgeted in Current F/Y: N/A

Annual Recurring Cost: N/A

Supervisory District: All

Vote Requirement: Majority

Agreement/Resolution/Ordinance Approved by County Counsel: N/A

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CEO Liaison: Janelle Rau, Deputy CEO

CEO Review: Yes

CEO Comments:

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Executed By: Deputy Clerk

Date: Date Executed

**Note to Department** Number of Original Agreements

Returned to Dept: Choose an item. Original Agreement

Delivered to Auditor? Choose an item.

Final Status:Item Status

Executed Item: item Number: