

(TRI-CITY REGIONAL SANITARY DISTRICT)

(form updated 8-2011)

NAME OF MEMBER (Also include supervisorial district if a member is representing a certain one.)	TYPE OF APPOINTMENT Mark with A, B, C, D or E – see below	NEW APPOINTMENT OR REAPPOINTMENT (Include BOS approval date next to letter) <u>New Appointment:</u> Choose “A” or “B” A -for existing vacancy or B -to fill a vacancy created by (provide name) or <u>Reappointment:</u> Mark with a “C” and include number of years served prior to most recent appointment		DATES OF TERM (Put the month, day and year both beginning & ending dates)	LENGTH OF TERM FOR CURRENT APPOINTMENT (# of years)
Richard Dixon	C	A (12/06/11)		06/20/11 – 12/31/12	1 yr 6 months
Mary Anne Moreno	C	A (12/06/11)		06/20/11 – 12/31/12	1 yr 6 months
Kevin Kenney	C	A (12/06/11)		06/20/11 – 12/31/14	3 yrs 6 months
Mitch Malkovich	C	A (12/06/11)		06/20/11 – 12/31/14	3 yrs 6 months
Robert Zache	C	A (12/06/11)		06/20/11 – 12/31/14	3 yrs 6 months

Appointment Designation Definitions:

A) Statutory District Appointment: Member must reside within the supervisorial district boundary from which he/she is appointed.

B) Supervisor Appointment: Member unrestricted by district.

C) Joint Appointment: Membership is comprised of appointments from different jurisdictions. Appointments made by other entities are acknowledged by the Board of Supervisors.

D) County at Large: Members are unrestricted by district and can be recommended by appointment by any supervisorial district or by the committee.

E) Alternate Members: As defined by individual committee criteria.