



NOTIFICATION TO CLERK OF APPOINTMENT

To: Clerk of the Board's Office: _ January 28, 2016 ____

From: (BCC or District Office): Children & Families Commission (aka: First Five Monterey County Commission)

Board of Supervisors Meeting Date: February 23, 2016_ (Effective date March 1, 2016)

Name of Board, Commission, or Committee: Children & Families Commission (aka: First Five Monterey County Commission)

Representing: Monterey County Health Department

Name of Appointee: Elsa Jimenez, Assistant Director of Health

Check one:

New Term _____

Reappointment _____

Filling an unexpired term _____ (if checked, list who is being replaced and reason below)

Replacing which member: _Ray Bullick_____

TERM EXPIRATION DATE: Pleasure of the Board

Maddy Act Regulations:

If applicable, check below regarding the reason for the unexpired term:

Resignation of member _____

Death of member _____

Member did not complete term _____

Other _____

TERM EXPIRATION DATE: ____ Pleasure of the Board ____