

NOTIFICATION TO CLERK OF APPOINTMENT
To: Clerk of the Board's Office: <u>Joel G. Pablo, Board of Supervisors Clerk</u> , <u>Deputy</u>
From: (BCC or District Office): <u>Kathy Stagnaro, Clerk of the Board</u>
Board of Supervisors Meeting Date: Tuesday, October 1, 2019
Name of Board, Commission, or Committee: <u>Santa Cruz-Monterey-Merced Managed Medical Care</u> <u>Commission</u>
Representing: Provider Representative
Name and address of Appointee:
Maximiliano Cuevas, MD
Phone Numbers: Business:
Email: mcuevas@csvs.org
Terms Check one:
New Term
Reappointment \underline{X}
Filling an unexpired term (if checked, list who is being replaced and reason below)
Replacing which member:
NEW TERM EXPIRATION DATE: December 31, 2023
Maddy Act Regulations: If applicable, check below regarding the reason for the unexpired term: N/A
Resignation of member
Death of member
Member did not complete term
Other
TERM EXPIRATION DATE:

Clerks use: _____ Web updated _____ Maddy Book updated _____ Added to Legistream agenda ____ COI Form Updated 07-16-15