

**Monterey County Board of Supervisors
Referral Submittal Form**

Referral No. 2026.16
Assignment Date: 8/11/26
(Completed by CAO's Office)

SUBMITTAL - Completed by referring Board office and returned to CAO no later than 10:00AM on Wednesday prior to Board meeting:

Date: 8/3/26	Submitted By: Supervisor Glenn Church	District #: 2
Referral Title: Board of Supervisors District Appointments		
Referral Purpose: Request that the Board of Supervisors establish a policy governing district-specific appointments to County boards, commissions and committees. A Supervisor shall not appoint a resident of another supervisorial district to a district-specific position without the prior consent of the Supervisor representing the proposed appointee's district of residence.		
Brief Referral Description (attach additional sheet as required) Members of the Board of Supervisors make appointments to numerous County boards, commissions and committees. Some positions are specifically allocated to individual supervisorial districts and are intended to provide geographic representation for the residents of those districts. Prepare a proposed policy providing that an appointment to a district-specific position should be filled by a resident of that district. When a Supervisor proposes to appoint a person who resides in another supervisorial district, the appointment may not be submitted for Board approval without the prior consent of the Supervisor representing the proposed appointee's district of residence. The proposed policy should identify any appropriate exceptions, address how consent is to be documented, and distinguish district-specific appointments from at-large, countywide, professional, agency-designated or other appointments for which district residency is not required.		
Classification - Implication	Mode of Response	
☐ Ministerial / Minor ☐ Land Use Policy ☐ Social Policy ☐ Budget Policy ☒ Other: <u>Board Governance Policy</u>	☐ Memo ☒ Board Report ☐ Presentation	
	Requested Response Timeline	
	☐ 2 weeks ☒ 1 month ☐ 6 weeks ☐ Status reports until completed ☐ Other: ASAP ☐ Specific Date: _____	

ASSIGNMENT – Provided by CAO at Board Meeting. Copied to Board Offices and Department Head(s) Completed by CAO's Office:

Department(s): <u>County Counsel</u>	Referral Lead: <u>Susan Blicht</u>	Board Date: <u>8/11/26</u>
--------------------------------------	------------------------------------	----------------------------

REASSIGNMENT – Provided by CAO. Copied to Board Offices and Department Head(s). Completed by CAO's Office:

Department(s):	Referral Lead:	Date:
----------------	----------------	-------

ANALYSIS - Completed by Department and copied to Board Offices and CAO:

Department analysis of resources required/impact on existing department priorities to complete referral:	
Analysis Completed By: _____ Date: _____	Department's Recommended Response Timeline ☐ By requested date ☐ 2 weeks ☐ 1 month ☐ 6 weeks ☐ 6 months ☐ 1 year ☐ Other/Specific Date: _____

REFERRAL RESPONSE/COMPLETION - Provided by Department to Board Offices and CAO:

Referral Response Date:	Board Item No.:	Referrals List Deletion:
-------------------------	-----------------	--------------------------

Note: Please cc Claudia Escalante and Karina Bokanovich on all CAO correspondence relating to referrals.