**Agency Report of:**
Public Official Appointments

**1. Agency Name**
City of Suisun City

**Division, Department, or Region (If Applicable)**
City Council

**Designated Agency Contact (Name, Title)**
Anita Skinner, City Clerk

**Area Code/Phone Number**
707 421-7300

**E-mail**
clerk@suisun.com

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**A Public Document**
California Form 806
For Official Use Only

**Date Posted:**
05/03/2021
(Month, Day, Year)

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**2. Appointments**

<table>
<thead>
<tr>
<th>Agency Boards and Commissions</th>
<th>Name of Appointed Person</th>
<th>Appt Date and Length of Term</th>
<th>Per Meeting/Annual Salary/Stipend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Solano County Water Agency</td>
<td>Hernandez, Alma (Last, First)</td>
<td>01/05/21</td>
<td>100 Per Meeting: $</td>
</tr>
<tr>
<td></td>
<td>Alternate, if any (Last, First)</td>
<td></td>
<td>Estimated Annual:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$0-$1,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$1,001-$2,000</td>
</tr>
<tr>
<td>Solano Transportation Authority</td>
<td>Williams, Wanda (Last, First)</td>
<td>01/05/21</td>
<td>100 Per Meeting: $</td>
</tr>
<tr>
<td></td>
<td>Alternate, if any (Last, First)</td>
<td></td>
<td>Estimated Annual:</td>
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</tbody>
</table>

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**3. Verification**

I have read and understand FPPC Regulation 18702.5. I have verified that the appointment and information identified above is true to the best of my information and belief.

**Signature of Agency Head or Designee**
Greg Folsom

**Print Name**

**Title**
City Manager

**Date**
05/03/2021
(Month, Day, Year)

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FPPC Form 806 (1/18)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)