



**Agency Report of:  
Public Official Appointments  
Continuation Sheet**

**1. Agency Name**

Date Posted: \_\_\_\_\_  
(Month, Day, Year)

**2. Appointments**

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
	▶ Name _____ (Last, First)  Alternate, if any _____ (Last, First)	▶ ____/____/____ Appt Date  ▶ _____ Length of Term	▶ Per Meeting: \$ _____ ▶ Estimated Annual: \$0-\$1,000      \$2,001-\$3,000 \$1,001-\$2,000      _____ Other
	▶ Name _____ (Last, First)  Alternate, if any _____ (Last, First)	▶ ____/____/____ Appt Date  ▶ _____ Length of Term	▶ Per Meeting: \$ _____ ▶ Estimated Annual: \$0-\$1,000      \$2,001-\$3,000 \$1,001-\$2,000      _____ Other
	▶ Name _____ (Last, First)  Alternate, if any _____ (Last, First)	▶ ____/____/____ Appt Date  ▶ _____ Length of Term	▶ Per Meeting: \$ _____ ▶ Estimated Annual: \$0-\$1,000      \$2,001-\$3,000 \$1,001-\$2,000      _____ Other
	▶ Name _____ (Last, First)  Alternate, if any _____ (Last, First)	▶ ____/____/____ Appt Date  ▶ _____ Length of Term	▶ Per Meeting: \$ _____ ▶ Estimated Annual: \$0-\$1,000      \$2,001-\$3,000 \$1,001-\$2,000      _____ Other
	▶ Name _____ (Last, First)  Alternate, if any _____ (Last, First)	▶ ____/____/____ Appt Date  ▶ _____ Length of Term	▶ Per Meeting: \$ _____ ▶ Estimated Annual: \$0-\$1,000      \$2,001-\$3,000 \$1,001-\$2,000      _____ Other
	▶ Name _____ (Last, First)  Alternate, if any _____ (Last, First)	▶ ____/____/____ Appt Date  ▶ _____ Length of Term	▶ Per Meeting: \$ _____ ▶ Estimated Annual: \$0-\$1,000      \$2,001-\$3,000 \$1,001-\$2,000      _____ Other