BOARD/COMMISSION/COMMITTEE APPOINTMENT

(This form needs to accompany the transmittal submitted to the Board of Supervisors)

(PLEASE PRINT)

BOARD/COMMISSION: Community Action Board (CAB)

CONTACT PERSON: <u>Tracey Belton</u>

NAME OF APPOINTEE:

Carol Thomas Hollister, CA 95023

PHONE: 8318019733 E-Mail: ctgoglobal@gmail.com

DATE APPOINTMENT EFFECTIVE: 3/12/2020

TERM ENDING: 3/12/2023

SUPERVISOR DISTRICT: #3, Representative of the Private

PREVIOUS APPOINTMENTS: Re-Appointment to the CAB

REQUIREMENTS:

If this is a new appointment, a copy of the letter of resignation from the replaced individual is to be attached to this form.

Return completed form along with transmittal to: San Benito County

Attention: Louie Valdez 481 Fourth Street

Hollister, CA 95023

AGENDA ITEM TRANSMITTAL		Agenda Time Esti	nates:	Leave Blank:	Date/Time Rec'd:		
		Minutes or 🔳 C			Date, fille fee di		
TO: Board of Supervisors FROM: TRACEY BELTON							
		CONTACT FOR IN			OF CERTIFIED COPIES		
HHSA Interim I	Jirector	Name: Enriqu Phone No: (831		REQUIRE 1	D:		
MEETING DATE:	(1) SUBJECT: Health & Hum			<u> </u>	INTMENT TO THE		
04/07/20	COMMUNITYACTION BOA	ARD (CAB) three-y	(CAB) three-year term effective 3/12/2020 through 3/12/2023				
• •	ON (If not summarized within this sp	·		·			
The Community Action Board requests the re-appointment of Ms. Carol Thomas as the District #3 Representative of the Private Sector. The CAB requests that the appointment be effective 3/12/2020.							
CAB's tripartite board reflects and promotes the unique anti-poverty leadership, action, and mobilization responsibilities assigned by law to community action agencies. CAB is responsible for assuring that it assesses and responds to the causes and conditions of poverty in their community, achieve anticipated family and community out comes, and remain administratively and fiscally sound.							
As a tripartite boards, its membership consists of 1) One-third of tripartite board membership must be democratically elected representatives of low-income individuals and families who reside in neighborhoods being served; 2) One-third must be elected officials, holding office at their time of selection, or their representatives; and 3) The remaining board members must be chosen from "business, industry, labor, religious, law enforcement, education, or other major groups and interests in the community served.							
OTHER AGENCY INVOLVEMENT:							
There are no other agencies involved in this request.							
(4) SUPPORTIVE DOCUMENTS	(5) PREVIOUS RELEVA) PREVIOUS RELEVANT BOARD ACTIONS ON THIS SPECIFIC ITEM:					
☐ Contract ☐ Ordinance	The BOS perio	ne BOS periodically approves CAB members					
(6) FUNDING SOURCE(S):		(7) CURRENT YEAR C		NUAL OR PROJECT	(9) BUDGETED: ☐YES ☐NO		
		^{\$} 0.00		\$0.00	□YES □NO		
(10) WILL PROPOSAL REQUIRE	E ADDITIONAL PERSONNEL?	ES NO If YES,	STATE NUMBER Permanent		nited Term		
(11) RECOMMENDED ACTION(S):						
• •	As. Carol Thomas as the term effective 3/12/2020	•		vate Sector for	District# 3 to the		
			DATE				
SIGNATURE OF AGENCY OR DEPARTMENT AUTHORIZED REPRESENTATIVE DATE							
□ ADDDO\/55		CLERK'S USE ONLY	CONT.	IIIED TO			
□ APPROVED □ DENIED □ ADOPTED □ CONTINUED TO □ ACKNOWLEDGED □ ACCEPTED □ RESOLUTION NO. OTHER							
☐ SET PUBLIC HEARING	☐ APPOINTED ☐ ORDINANO		NO ACTIO	N TAKEN			
BY:							
Deputy Clerk of the	Board						
DATE:							

Revised: 9/26/2013