



**NATHAN FLETCHER**  
SUPERVISOR, FOURTH DISTRICT  
San Diego County Board Of Supervisors

COUNTY OF SAN DIEGO  
2022 JAN 31 AM 8:22  
CLERK OF THE BOARD  
OF SUPERVISORS

**DATE:** February 8, 2022  
**TO:** BOARD OF SUPERVISORS  
**SUBJECT:** Appointment to FIRST 5 COMMISSION, Seat No. 3

**Recommendation:**  
CHAIR NATHAN FLETCHER

Re-appoint Rick Richardson to the FIRST 5 COMMISSION, Seat No. 3 for a term to begin February 26, 2022 and to expire February 25, 2024.

Respectfully submitted,

A handwritten signature in black ink that reads "Nathan Fletcher".

NATHAN FLETCHER  
Supervisor, Fourth District  
San Diego County Board of Supervisors



COUNTY OF SAN DIEGO

2022 JAN 31 AM 8:37

CLERK OF THE BOARD  
OF SUPERVISORS

## JOEL ANDERSON

SUPERVISOR, SECOND DISTRICT  
SAN DIEGO COUNTY BOARD OF SUPERVISORS

### AGENDA ITEM

**DATE:** February 08, 2022

**TO:** Board of Supervisors

**RE: SSUBJECT: VARIOUS APPOINTMENTS (DISTRICT: 2)**

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#### **RECOMMENDATION(S): SUPERVISOR JOEL ANDERSON**

Appoint Christine McCunney to the POTRERO COMMUNITY PLANNING GROUP, Seat No. 6 for a term to expire January 2, 2023.

Appoint Barbara Nigro to the JULIAN COMMUNITY PLANNING GROUP, Seat No. 1 for a term to expire January 6, 2025.

#### **BACKGROUND**

Christine McCunney  
[REDACTED]

Barbara Nigro  
[REDACTED]

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Joel Anderson".

Joel Anderson, Supervisor, Second District



County of San Diego, Planning & Development Services

**APPLICATION FOR APPOINTMENT TO A  
PLANNING OR SPONSOR GROUP VACANCY**

COUNTY OF SAN DIEGO  
2022 JAN 27 PM 3:05

*For Non-Election Appointments Only –  
Not to be used for Regular Planning Group Elections*

CLERK OF THE BOARD  
OF SUPERVISORS

To be considered by a Community Planning or Sponsor Group for an appointment recommendation, interested candidates shall complete the following application. Once complete, the applicant shall submit the application to the group Chair. After the application is signed by the group's current Chair, the Chair will submit the application to the Registrar of Voters for certification. However, completion of the aforementioned process does not ensure that the candidate will be recommended for appointment or subsequently appointed.

Planning or Sponsor Group Name: Julian Community Planning Group

Applicant Name: Barbara Nigro

Supervisory District: 2

**Current Membership on Other Boards, Commissions or Committees (BCC):**

Name of BCC: N/A at this time Date Appointed: 1/27/22

**Specialized Experience or Knowledge:**

I have been in sales for over 40 years as a sales manager in the newspaper and the corporate furniture industry, working with CEOs, architects, designers and engineers as well as leading the Quality Control program at a Haworth Company. I was the president of the Julian Arts Guild and have been a photographer and artist my entire adult life. I served on the board of directors for the Center for Community Solutions in San Diego County raising money and doing volunteer work.

**Occupational Experience:**

	Employer	Position Title	Dates of Employment
Current:	<u>Self employed</u>	<u>Sales and creation of art and Photography</u>	<u>50 years</u>
Past:	<u>Herman Miller and Haworth</u>	<u>Sales</u>	<u>1991-2005</u>
Past:	<u>Hartford Courant</u>	<u>Sales Manager</u>	<u>1980-1989</u>

**Statement of why you feel you would be the best candidate to fill this vacancy:**

I have been a full time resident of Julian since 2006. I am fully invested in the future of our town. Having worked with everyone from CEOs to architects and designers, I believe my experience would enable me to be an active and effective member of the group. Julian is a special and unique place. I would work hard to make sure it remains thus



County of San Diego, Planning & Development Services

APPLICATION FOR APPOINTMENT TO A PLANNING OR SPONSOR GROUP VACANCY

For Non-Election Appointments Only - Not to be used for Regular Planning Group Elections

The undersigned agrees to comply with all Board of Supervisors policies pertaining to Community Planning or Sponsor Groups and understands that group members are subject to the open meeting requirements of the Ralph M. Brown Act.

By signing below, I declare that the information provided is accurate and complete to the best of my knowledge.

If applying for a Planning Group: I declare that I am a registered voter living within the Planning Group's boundaries.

If applying for a Sponsor Group: I declare that I am a registered voter and currently own property in or reside within the Sponsor Group's boundaries.

If appointed, I will file a Form 700, Statement of Economic Interest, in a timely manner as instructed in the appointment letter.

Signature: Barbara B Nigro Date: 12-6-2022
Print Name on Voter's Registration Form: Barbara Nigro
First Name Last Name

Community Planning/Sponsor Group Chair or Designated Representative Endorsement:

Group Chair:

As the current Chair of the Community Planning/Sponsor Group, I confirm that I have reviewed this application for completeness, and it may be certified by the ROV.

Signature: Patrick P Brown Date: 1/24, 2022
Print Name: Patrick L Brown Date Elected Chair: 10-21-2014
Email Address: Phone:

For Internal Use Only:

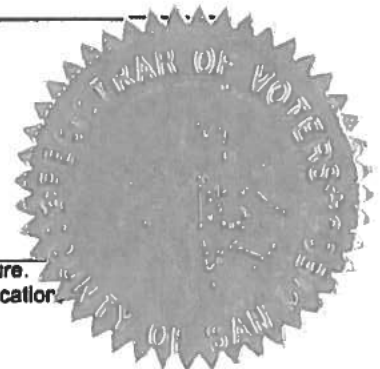
Registrar of Voters Confirmation:

I certify that the applicant is a registered voter and is eligible for membership of the Julian Community Planning/Sponsor Group for which he/she seeks to be appointed.

Voter ID # Signed: Deputy Registrar of Voters

ROV Date Stamp:

2022 JAN 25 A 11:54





County of San Diego, Planning & Development Services

**APPLICATION FOR APPOINTMENT TO A  
PLANNING OR SPONSOR GROUP VACANCY**

*For Non-Election Appointments Only –  
Not to be used for Regular Planning Group Elections*

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This application is a public record and is subject to the rules of disclosure.

The following private information is for internal use only and will not be posted to the website.

Name: Barbara Nigro Supervisorial District: 2

Residence Address:

[REDACTED]

Mailing Address (if different from above):

same

Business Address:

same

E-mail Address:

[REDACTED]

Telephone Numbers (include area code):

Home: \_\_\_\_\_

Cell: [REDACTED] \_\_\_\_\_

Work: \_\_\_\_\_



County of San Diego, Planning & Development Services

COUNTY OF SAN DIEGO

APPLICATION FOR APPOINTMENT TO A PLANNING OR SPONSOR GROUP VACANCY

2022 JAN 19 AM 10:31  
CLERK OF THE BOARD OF SUPERVISORS

For Non-Election Appointments Only - Not to be used for Regular Planning Group Elections

To be considered by a Community Planning or Sponsor Group for an appointment recommendation, interested candidates shall complete the following application. Once complete, the applicant shall submit the application to the group Chair. After the application is signed by the group's current Chair, the Chair will submit the application to the Registrar of Voters for certification. However, completion of the aforementioned process does not ensure that the candidate will be recommended for appointment or subsequently appointed.

Planning or Sponsor Group Name: POTRERO COMMUNITY PLANNING GROUP

Applicant Name: CHRISTINE McCUNNEY (aka Tina Brown)

Supervisorial District: 2

Current Membership on Other Boards, Commissions or Committees (BCC):

Name of BCC:

Date Appointed:

N/A

Specialized Experience or Knowledge:

Previously served on the Potrero CPG, in the early 2000's.

Occupational Experience:

	Employer	Position Title	Dates of Employment
Current:	RETIRED		
Past:	San Diego Unified School Dist.	TEACHER	1983 - 2019
Past:			

Statement of why you feel you would be the best candidate to fill this vacancy:

I've been a Potrero homeowner for over 20 years. I'm proud of our community for its history of preserving our "community character". I want to help to continue this mission.



County of San Diego, Planning & Development Services

APPLICATION FOR APPOINTMENT TO A PLANNING OR SPONSOR GROUP VACANCY

For Non-Election Appointments Only - Not to be used for Regular Planning Group Elections

The undersigned agrees to comply with all Board of Supervisors policies pertaining to Community Planning or Sponsor Groups and understands that group members are subject to the open meeting requirements of the Ralph M. Brown Act.

By signing below, I declare that the information provided is accurate and complete to the best of my knowledge.

If applying for a Planning Group: I declare that I am a registered voter living within the Planning Group's boundaries

If applying for a Sponsor Group: I declare that I am a registered voter and currently own property in or reside within the Sponsor Group's boundaries

If appointed, I will file a Form 700, Statement of Economic Interest, in a timely manner as instructed in the appointment letter.

Signature: Christine McCunney Date: Sept 28, 2021

Print Name on Voter's Registration Form: CHRISTINE MCCUNNEY First Name Last Name

Community Planning/Sponsor Group Chair or Designated Representative Endorsement:

Group Chair:

As the current Chair of the Potrero Community Planning Group Community Planning/Sponsor Group, I confirm that I have reviewed this application for completeness, and it may be certified by the ROV.

Signature: [Signature] Date: 28 Sept. 2021

Print Name: Roberto/Bob Uribe Date Elected Chair: Oct. 2020

Email Address: [Redacted] Phone: [Redacted]

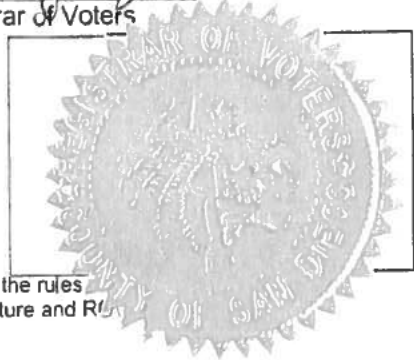
For Internal Use Only:

Registrar of Voters Confirmation:

I certify that the applicant is a registered voter and is eligible for membership of the Potrero Community Planning/Sponsor Group for which he/she seeks to be appointed.

Voter ID # [Redacted] Signed: [Signature] Deputy Registrar of Voters

ROV Date Stamp: OCT -8 P 3: 33 REC'D S. D. CO. ROV



This application is a public record and is subject to the rules Not valid for appointment without current Chair's signature and R/



County of San Diego, Planning & Development Services

**APPLICATION FOR APPOINTMENT TO A  
PLANNING OR SPONSOR GROUP VACANCY**

*For Non-Election Appointments Only –  
Not to be used for Regular Planning Group Elections*

This application is a public record and is subject to the rules of disclosure.

The following private information is for internal use only and will not be posted to the website.

Name: Christine McCunney Supervisorial District: 2

Residence Address:

[Redacted]

Mailing Address (if different from above):

[Redacted]

Business Address:

\_\_\_\_\_

E-mail Address:

[Redacted]

Telephone Numbers (include area code):

Home: [Redacted]

Cell: 619 441 1111

Work: \_\_\_\_\_

*ROTHROD CPE*  
*1/1/19*





**JIM DESMOND**  
SUPERVISOR, FIFTH DISTRICT  
SAN DIEGO COUNTY BOARD OF SUPERVISORS

COUNTY OF SAN DIEGO  
2022 JAN 24 PM 12:59

CLERK OF THE BOARD  
OF SUPERVISORS

**AGENDA ITEM**

DATE: February 8, 2022

TO: BOARD OF SUPERVISORS

SUBJECT: Appointment to CSA NO. 081 - FALLBROOK LOCAL PARKS ADVISORY  
COMMITTEE, Seat No. 1

**Recommendation:**  
**SUPERVISOR JIM DESMOND**

Appoint James Loge to the CSA NO. 081 - FALLBROOK LOCAL PARKS ADVISORY  
COMMITTEE, Seat No. 1 for a term to expire January 2, 2023.

**BACKGROUND:**

James Loge - [REDACTED]

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Jim Desmond".

JIM DESMOND  
Supervisor, Fifth District

**SUBJECT:** (District: 5)

**BOARD OF SUPERVISORS  
AGENDA ITEM INFORMATION SHEET**

**CONCURRENCE(S)**

<b>COUNTY COUNSEL REVIEW</b> Written Disclosure per County Charter Section 1000.1 Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>GROUP/AGENCY FINANCE DIRECTOR</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>CHIEF FINANCIAL OFFICER</b> Requires Four Votes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>GROUP/AGENCY INFORMATION TECHNOLOGY DIRECTOR</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>COUNTY TECHNOLOGY OFFICE</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>DEPARTMENT OF HUMAN RESOURCES</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>Other Concurrence(s):</b>	N/A

**ORIGINATING DEPARTMENT:** Jim Desmond  
Supervisor, Fifth District

**CONTACT PERSON:**

Marisol Edrozo

\_\_\_\_\_  
Name

619-531-5555

\_\_\_\_\_  
Phone

619-685-2555

\_\_\_\_\_  
Fax

A-500

\_\_\_\_\_  
Mail Station

Marisol.Edrozo@sdcounty.ca.gov

\_\_\_\_\_  
E-Mail

**AUTHORIZED REPRESENTATIVE:** \_\_\_\_\_



COUNTY OF SAN DIEGO

APPLICATION FOR COUNTY OF SAN DIEGO BOARD, COMMISSION, OR COMMITTEE

COUNTY OF SAN DIEGO  
2021 DEC 15 AM 9:20  
CLERK OF THE BOARD OF SUPERVISORS  
(For Official Use Only)

**INSTRUCTIONS:** Please complete this form in its entirety. Be sure to include the full title of the Board, Commission or Committee for which you desire consideration. Note the additional requirements listed at the bottom of the second page.

Please note that this application is a public record subject to disclosure. This application will be maintained for a period of one year. After one year, it is necessary to file a new application for another year of eligibility.

Submit the completed application to the Clerk of the Board of Supervisors, BCC Desk, 1600 Pacific Highway, Room 402, San Diego, CA 92101-2471 or via e-mail at [bcc@sdcounty.ca.gov](mailto:bcc@sdcounty.ca.gov)

<u>Loge</u> <i>Last Name</i>	<u>James</u> <i>First Name</i>
<u>CSA-81</u> <i>Name of Board, Committee, or Commission to Which You are Applying for Membership</i>	<u>5</u> <i>Supervisorial District You Live In</i>

County boards, commissions, and committees meet at times mutually satisfactory to the members. Day meetings are more common than evening meetings. Will you be able to schedule your time accordingly?  Yes  No

*Please list any time restrictions*

What are your principal areas of interest in County Government?

\_\_\_\_\_

\_\_\_\_\_

List all County Boards, Commissions or Committees of which you are a current member.

<i>Committee Name</i>	<i>Date Appointed</i>
Fallbrook Community Planning Group	08-2021
_____	_____
_____	_____

List past County appointments with dates served, and other past or present community or public service appointments.

<i>Committee/Organization Name</i>	<i>Dates Served</i>
_____	_____
_____	_____
_____	_____

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**STATEMENT OF OCCUPATIONAL EXPERIENCE**

Fujitsu	
<i>Current Employer</i>	
Service Delivery Manager	2 years
<i>Job Title</i>	<i>Length of Employment</i>

Previous Employers	Position Title	Length of Employment
Vertiv	Project Manager	23 years
_____	_____	_____
_____	_____	_____
_____	_____	_____

**What experience or special knowledge can you bring to your area(s) of interest?**  
 Many years of community service

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**Please list community organizations to which you belong:**

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**NOTE:** Candidates for the Assessment Appeals Board, County Hearing Officer, Eye Gnat Abatement Appeals Board, Fly Abatement and Appeals Board and/or Planning Commission, are required to submit evidence of their qualifications and a Statement of Incompatible Activities Related to County Duties (Form 519) that can be found on the Clerk of the Board’s website at: [www.sandiegocounty.gov/content/sdc/cob/forms.html](http://www.sandiegocounty.gov/content/sdc/cob/forms.html). Candidates may be asked to provide additional information.

Membership qualifications for all County Boards, Commissions and Committees may be accessed through the Clerk of the Board’s website at [www.sandiegocounty.gov/cob/bcac/](http://www.sandiegocounty.gov/cob/bcac/) or by calling (619) 531-5600. This Application will be considered complete when such requirements are provided by the applicant.




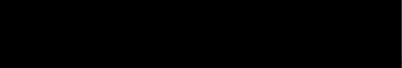
By signing below, I declare that the information provided above is accurate and complete to the best of my knowledge.

James Loge	12/14/21
<i>Applicant’s Signature</i>	<i>Date</i>

## CONTACT INFORMATION

*Note: Personal information may be withheld from public view as allowed by law.*

<b>Loge</b> <i>Last Name</i>	<b>Jamse (Jim)</b> <i>First Name</i>
<b>CSA-81</b> <i>Name of Board, Committee, or Commission to Which You are Applying for Membership</i>	<b>5</b> <i>Supervisorial District You Live In</i>

 <i>Home Street Address</i>	 <i>City</i>	 <i>State</i> <i>Zip</i>
 <i>Mailing Address (if different than home address)</i>	 <i>City</i>	 <i>State</i> <i>Zip</i>
 <i>Business Street Address</i>	 <i>City</i>	 <i>State</i> <i>Zip</i>
 <i>Home Phone #</i>	 <i>Business Phone #</i>	
 <i>Mobile Phone #</i>	 <i>Fax #</i>	
 <i>E-Mail Address</i>		



**JIM DESMOND**  
SUPERVISOR, FIFTH DISTRICT  
SAN DIEGO COUNTY BOARD OF SUPERVISORS

**AGENDA ITEM**

COUNTY OF SAN DIEGO  
2022 JAN 24 PM 12:59  
CLERK OF THE BOARD  
OF SUPERVISORS

DATE: February 8, 2022  
TO: BOARD OF SUPERVISORS  
SUBJECT: Appointment to CSA NO. 081 - FALLBROOK LOCAL PARKS ADVISORY  
COMMITTEE, Seat No. 3

**Recommendation:**  
**SUPERVISOR JIM DESMOND**

Appoint David Throop to the CSA NO. 081 - FALLBROOK LOCAL PARKS ADVISORY  
COMMITTEE, Seat No. 3 for a term to expire January 2, 2023.

**BACKGROUND:**

David Throop - [REDACTED]

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Jim Desmond".

JIM DESMOND  
Supervisor, Fifth District

**SUBJECT:** (District: 5)

**BOARD OF SUPERVISORS  
AGENDA ITEM INFORMATION SHEET**

**CONCURRENCE(S)**

<b>COUNTY COUNSEL REVIEW</b> Written Disclosure per County Charter Section 1000.1 Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>GROUP/AGENCY FINANCE DIRECTOR</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>CHIEF FINANCIAL OFFICER</b> Requires Four Votes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>GROUP/AGENCY INFORMATION TECHNOLOGY DIRECTOR</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>COUNTY TECHNOLOGY OFFICE</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>DEPARTMENT OF HUMAN RESOURCES</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>Other Concurrence(s):</b>	N/A

**ORIGINATING DEPARTMENT:** Jim Desmond  
Supervisor, Fifth District

**CONTACT PERSON:**

Marisol Edrozo

\_\_\_\_\_  
Name

619-531-5555

\_\_\_\_\_  
Phone

619-685-2555

\_\_\_\_\_  
Fax

A-500

\_\_\_\_\_  
Mail Station

Marisol.Edrozo@sdcounty.ca.gov

\_\_\_\_\_  
E-Mail

**AUTHORIZED REPRESENTATIVE:** \_\_\_\_\_



COUNTY OF SAN DIEGO

APPLICATION FOR COUNTY OF SAN DIEGO BOARD, COMMISSION, OR COMMITTEE

COUNTY OF SAN DIEGO
2021 OCT 12 AM 11:18
CLERK OF THE BOARD OF SUPERVISORS

(For Official Use Only)

INSTRUCTIONS: Please complete this form in its entirety. Be sure to include the full title of the Board, Commission or Committee for which you desire consideration. Note the additional requirements listed at the bottom of the second page.

Please note that this application is a public record subject to disclosure. This application will be maintained for a period of one year. After one year, it is necessary to file a new application for another year of eligibility.

Submit the completed application to the Clerk of the Board of Supervisors, BCC Desk, 1600 Pacific Highway, Room 402, San Diego, CA 92101-2471 or via e-mail at bcc@sdcounty.ca.gov

THROOP (Last Name) DAVID (First Name)
County Service Area No. 081 - Fallbrook Local Parks District 5 and Advisory Committee (Name of Board, Committee, or Commission to Which You are Applying for Membership)
Supervisorial District 5 You Live In

County boards, commissions, and committees meet at times mutually satisfactory to the members. Day meetings are more common than evening meetings. Will you be able to schedule your time accordingly? [X] Yes [ ] No
Please list any time restrictions

What are your principal areas of interest in County Government?
All areas that are community focused. Help direct government aid and services for our community. Our parks and open space are integral to a thriving community and sustainable environment

List all County Boards, Commissions or Committees of which you are a current member.
Committee Name Date Appointed

List past County appointments with dates served, and other past or present community or public service appointments.
Committee/Organization Name Dates Served



**STATEMENT OF OCCUPATIONAL EXPERIENCE**

**RETIRED**

Current Employer

Job Title

Length of Employment

Previous Employers	Position Title	Length of Employment
Home Depot	Inventory Management	14 yrs
40 yrs California Certified Nurs. #20980	Specialist / Boy's	
40 yrs Landscape Const.	Prevention Supr.	
40 yrs Nursery Experience		

What experience or special knowledge can you bring to your area(s) of interest?

I am a father of four children and am a resident of Fallbrook for the last 25 years. I am a professional in the plant industry and cultivation

Please list community organizations to which you belong:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**NOTE:** Candidates for the Assessment Appeals Board, County Hearing Officer, Eye Gnat Abatement Appeals Board, Fly Abatement and Appeals Board and/or Planning Commission, are required to submit evidence of their qualifications and a Statement of Incompatible Activities Related to County Duties (Form 519) that can be found on the Clerk of the Board's website at: [www.sandiegocounty.gov/content/sdc/cob/forms.html](http://www.sandiegocounty.gov/content/sdc/cob/forms.html). Candidates may be asked to provide additional information.

Membership qualifications for all County Boards, Commissions and Committees may be accessed through the Clerk of the Board's website at [www.sandiegocounty.gov/cob/bcac/](http://www.sandiegocounty.gov/cob/bcac/) or by calling (619) 531-5600. This Application will be considered complete when such requirements are provided by the applicant.

By signing below, I declare that the information provided above is accurate and complete to the best of my knowledge.

*[Handwritten Signature]*  
Applicant's Signature

10/04/2021  
Date

**CONTACT INFORMATION**

*Note: Personal information may be withheld from public view as allowed by law.*

<u>TITROOP</u> <i>Last Name</i>	<u>DAVID</u> <i>First Name</i>
<u>County Service Area No. 091 - Fallbrook Local Parks Advisory Committee</u> <i>Name of Board, Committee, or Commission to Which You are Applying for Membership</i>	<u>District 5</u> <i>Supervisorial District You Live In</i>

<u>[REDACTED]</u> <i>Home Street Address</i>	<u>[REDACTED]</u> <i>City</i>	<u>[REDACTED]</u> <i>State</i>	<u>[REDACTED]</u> <i>Zip</i>
<u>[REDACTED]</u> <i>Mailing Address (if different than home address)</i>	<u>[REDACTED]</u> <i>City</i>	<u>[REDACTED]</u> <i>State</i>	<u>[REDACTED]</u> <i>Zip</i>
<u>[REDACTED]</u> <i>Business Street Address</i>	<u>[REDACTED]</u> <i>City</i>	<u>[REDACTED]</u> <i>State</i>	<u>[REDACTED]</u> <i>Zip</i>
<u>[REDACTED]</u> <i>Home Phone #</i>	<u>[REDACTED]</u> <i>Business Phone #</i>		
<u>Same</u> <i>Mobile Phone #</i>	<u>[REDACTED]</u> <i>Fax #</i>		
<u>[REDACTED]</u> <i>E-Mail Address</i>			



**JIM DESMOND**  
SUPERVISOR, FIFTH DISTRICT  
SAN DIEGO COUNTY BOARD OF SUPERVISORS

**AGENDA ITEM**

COUNTY OF SAN DIEGO

2022 JAN 20 PM 1:25

CLERK OF THE BOARD  
OF SUPERVISORS

DATE: February 8, 2022

TO: BOARD OF SUPERVISORS

SUBJECT: Appointment to HIDDEN MEADOWS COMMUNITY SPONSOR GROUP,  
Seat No. 8

**Recommendation:  
SUPERVISOR JIM DESMOND**

Appoint Paul M. Hogan to the HIDDEN MEADOWS COMMUNITY SPONSOR GROUP,  
Seat No. 8 for a term to expire January 2, 2023.

**BACKGROUND:**

Paul Hogan – 

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Jim Desmond".

JIM DESMOND  
Supervisor, Fifth District

**SUBJECT:** (District: 5)

**BOARD OF SUPERVISORS  
AGENDA ITEM INFORMATION SHEET**

**CONCURRENCE(S)**

<b>COUNTY COUNSEL REVIEW</b> Written Disclosure per County Charter Section 1000.1 Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>GROUP/AGENCY FINANCE DIRECTOR</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>CHIEF FINANCIAL OFFICER</b> Requires Four Votes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>GROUP/AGENCY INFORMATION TECHNOLOGY DIRECTOR</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>COUNTY TECHNOLOGY OFFICE</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>DEPARTMENT OF HUMAN RESOURCES</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>Other Concurrence(s):</b>	N/A

**ORIGINATING DEPARTMENT:** Jim Desmond  
Supervisor, Fifth District

**CONTACT PERSON:**

Marisol Edrozo  
\_\_\_\_\_  
Name  
619-531-5555  
\_\_\_\_\_  
Phone  
619-685-2555  
\_\_\_\_\_  
Fax  
A-500  
\_\_\_\_\_  
Mail Station  
Marisol.Edrozo@sdcounty.ca.gov  
E-Mail

**AUTHORIZED REPRESENTATIVE:** \_\_\_\_\_



County of San Diego, Planning & Development Services

APPLICATION FOR APPOINTMENT TO A PLANNING OR SPONSOR GROUP VACANCY

COUNTY OF SAN DIEGO
2021 OCT 29 PM 4:12
CLERK OF THE COUNTY OF SUPERVISORS

For Non-Election Appointments Only -
Not to be used for Regular Planning Group Elections

To be considered by a Community Planning or Sponsor Group for an appointment recommendation, interested candidates shall complete the following application. Once complete, the applicant shall submit the application to the group Chair. After the application is signed by the group's current Chair, the Chair will submit the application to the Registrar of Voters for certification. However, completion of the aforementioned process does not ensure that the candidate will be recommended for appointment or subsequently appointed.

Planning or Sponsor Group Name: Hidden Meadows Sponsor Group

Applicant Name: Paul M. Hogan

Supervisorial District: 5

Current Membership on Other Boards, Commissions or Committees (BCC):

Table with 2 columns: Name of BCC, Date Appointed. Includes three empty rows for data entry.

Specialized Experience or Knowledge:

Experience serving as vice chair on a municipal task force enforcing access to public records and open meetings

Occupational Experience:

Table with 3 columns: Employer, Position Title, Dates of Employment. Lists Latham & Watkins LLP, Discovia LLC, and Howard Rice.

Statement of why you feel you would be the best candidate to fill this vacancy:

As a commercial citrus grove owner in Hidden Meadows, I want to ensure that the needs of small farmers are considered in future planning decisions while we seek to improve our infrastructure and welcome newcomers into our area. I feel passionately about fire prevention and water conservation.

I am a consensus builder and dedicated to listening to concerns on all sides of an issue to try to find mutually agreeable solutions.



County of San Diego, Planning & Development Services

APPLICATION FOR APPOINTMENT TO A PLANNING OR SPONSOR GROUP VACANCY

For Non-Election Appointments Only - Not to be used for Regular Planning Group Elections

The undersigned agrees to comply with all Board of Supervisors policies pertaining to Community Planning or Sponsor Groups and understands that group members are subject to the open meeting requirements of the Ralph M. Brown Act.

By signing below, I declare that the information provided is accurate and complete to the best of my knowledge.

If applying for a Planning Group: I declare that I am a registered voter living within the Planning Group's boundaries.

If applying for a Sponsor Group: I declare that I am a registered voter and currently own property in or reside within the Sponsor Group's boundaries.

If appointed, I will file a Form 700, Statement of Economic Interest, in a timely manner as instructed in the appointment letter.

Signature: [Handwritten Signature]

Date: October 26, 2021

Print Name on Voter's Registration Form: Paul Hogan
First Name Last Name

Community Planning/Sponsor Group Chair or Designated Representative Endorsement:

Group Chair:

As the current Chair of the Hidden Meadows Community Planning/Sponsor Group, I confirm that I have reviewed this application for completeness, and it may be certified by the ROV.

Signature: [Handwritten Signature]

Date: 10/29/21

Print Name: James Chagala

Date Elected Chair: 1/24/19

Email Address: [Redacted]

Phone: [Redacted]

For Internal Use Only:

Registrar of Voters Confirmation:

I certify that the applicant is a registered voter and is eligible for membership of the Hidden Meadows Community Planning/Sponsor Group for which he/she seeks to be appointed.

Voter ID # [Redacted]

Signed: [Handwritten Signature] Deputy Registrar of Voters

ROV Date Stamp:



2021 OCT 29 P 3: 21
REC'D S. D. CO. ROV

Not valid if record and is subject to the rules of disclosure. Without current Chair's signature and ROV certification.



County of San Diego, Planning & Development Services

## APPLICATION FOR APPOINTMENT TO A PLANNING OR SPONSOR GROUP VACANCY

*For Non-Election Appointments Only –  
Not to be used for Regular Planning Group Elections*

This application is a public record and is subject to the rules of disclosure.

The following private information is for internal use only and will not be posted to the website.

Name: Paul M. Hogan Supervisorial District: 5

Residence Address:

[REDACTED]

Mailing Address (if different from above):

\_\_\_\_\_

Business Address:

\_\_\_\_\_

E-mail Address:

[REDACTED]

Telephone Numbers (include area code):

Home: [REDACTED]

Cell: \_\_\_\_\_

Work: [REDACTED]



**JIM DESMOND**  
SUPERVISOR, FIFTH DISTRICT  
SAN DIEGO COUNTY BOARD OF SUPERVISORS

COUNTY OF SAN DIEGO  
2022 JAN 31 AM 8:07  
CLERK OF THE BOARD  
OF SUPERVISORS

**AGENDA ITEM**

**DATE:** February 8, 2022

**TO:** BOARD OF SUPERVISORS

**SUBJECT:** Appointment to I-15 CORRIDOR DESIGN REVIEW BOARD, Seat No. 2

**Recommendation:  
SUPERVISOR JIM DESMOND**

Appoint Gregory Doud to the I-15 CORRIDOR DESIGN REVIEW BOARD, Seat No. 2 for a term to begin February 16, 2022 and to expire February 16, 2024.

**BACKGROUND:**

Gregory Doud - [REDACTED]

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Jim Desmond".

**JIM DESMOND**  
Supervisor, Fifth District



**SUBJECT:** (District: 5)

**BOARD OF SUPERVISORS  
AGENDA ITEM INFORMATION SHEET**

**CONCURRENCE(S)**

<b>COUNTY COUNSEL REVIEW</b> Written Disclosure per County Charter Section 1000.1 Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>GROUP/AGENCY FINANCE DIRECTOR</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>CHIEF FINANCIAL OFFICER</b> Requires Four Votes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>GROUP/AGENCY INFORMATION TECHNOLOGY DIRECTOR</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>COUNTY TECHNOLOGY OFFICE</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>DEPARTMENT OF HUMAN RESOURCES</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<b>Other Concurrence(s):</b>	N/A

**ORIGINATING DEPARTMENT:** Jim Desmond  
Supervisor, Fifth District

**CONTACT PERSON:**

Marisol Edrozo

\_\_\_\_\_  
Name

619-531-5555

\_\_\_\_\_  
Phone

619-685-2555

\_\_\_\_\_  
Fax

A-500

\_\_\_\_\_  
Mail Station

Marisol.Edrozo@sdcounty.ca.gov

\_\_\_\_\_  
E-Mail

**AUTHORIZED REPRESENTATIVE:** \_\_\_\_\_



COUNTY OF SAN DIEGO

APPLICATION FOR COUNTY OF SAN DIEGO BOARD, COMMISSION, OR COMMITTEE

COUNTY OF SAN DIEGO  
2022 JAN 24 AM 9:45

CLERK OF THE BOARD OF SUPERVISORS

(For Official Use Only)

**INSTRUCTIONS:** Please complete this form in its entirety. Be sure to include the full title of the Board, Commission or Committee for which you desire consideration. Note the additional requirements listed at the bottom of the second page.

Please note that this application is a public record subject to disclosure. This application will be maintained for a period of one year. After one year, it is necessary to file a new application for another year of eligibility.

Submit the completed application to the Clerk of the Board of Supervisors, BCC Desk, 1600 Pacific Highway, Room 402, San Diego, CA 92101-2471 or via e-mail at [bcc@sdcounty.ca.gov](mailto:bcc@sdcounty.ca.gov)

<u>DOWD</u> Last Name	<u>GREGORY</u> First Name
<u>I-15 Corridor Design Review - Seat 2</u> Name of Board, Committee, or Commission to Which You are Applying for Membership	
	<u>5</u> Supervisorial District You Live In

County boards, commissions, and committees meet at times mutually satisfactory to the members. Day meetings are more common than evening meetings. Will you be able to schedule your time accordingly?  Yes  No

Please list any time restrictions

What are your principal areas of interest in County Government?  
Support local Community INTERESTS/NEEDS

List all County Boards, Commissions or Committees of which you are a current member.

Committee Name	Date Appointed
<u>Rainbow Planning Group</u>	<u>JAN/21</u>

List past County appointments with dates served, and other past or present community or public service appointments.

Committee/Organization Name	Dates Served

**STATEMENT OF OCCUPATIONAL EXPERIENCE**

<u>Manpower</u> <small>Current Employer</small>	
<u>ENGINEERING Consultant</u> <small>Job Title</small>	<u>3 yrs</u> <small>Length of Employment</small>

Previous Employers	Position Title	Length of Employment
<u>Qualcomm</u>	<u>DIRECTOR</u>	<u>20 yrs</u>

**What experience or special knowledge can you bring to your area(s) of interest?**

UNDERSTANDING OF TECHNICAL DETAILS, BUILDING STANDARDS / CODE.

**Please list community organizations to which you belong:**

**NOTE:** Candidates for the Air Pollution Control District Hearing Board, Assessment Appeals Board, County Hearing Officer, Eye Gnat Abatement Appeals Board, Fly Abatement and Appeals Board and/or Planning Commission, are required to submit evidence of their qualifications and a Statement of Incompatible Activities Related to County Duties (Form 519) that can be found on the Clerk of the Board's website at: [www.sandiegocounty.gov/content/sdc/cob/forms.html](http://www.sandiegocounty.gov/content/sdc/cob/forms.html). Candidates may be asked to provide additional information.

Membership qualifications for all County Boards, Commissions and Committees may be accessed through the Clerk of the Board's website at [www.sandiegocounty.gov/cob/bcac/](http://www.sandiegocounty.gov/cob/bcac/) or by calling (619) 531-5600. This Application will be considered complete when such requirements are provided by the applicant.

By signing below, I declare that the information provided above is accurate and complete to the best of my knowledge.

[Signature] 11/18/21

Applicant's Signature Date

## CONTACT INFORMATION

Note: Personal information may be withheld from public view as allowed by law.

<u>Dowd</u> Last Name	<u>Gregory</u> First Name
<u>I-15 Corridor DESIGN Review - Seat 2</u> Name of Board, Committee, or Commission to Which You are Applying for Membership	<u>5</u> Supervisorial District You Live In

<u>[REDACTED]</u> Home Street Address	<u>[REDACTED]</u> City	<u>[REDACTED]</u> State	<u>[REDACTED]</u> Zip
<u>[REDACTED]</u> Mailing Address (if different than home address)	<u>[REDACTED]</u> City	<u>[REDACTED]</u> State	<u>[REDACTED]</u> Zip
<u>[REDACTED]</u> Business Street Address	<u>[REDACTED]</u> City	<u>[REDACTED]</u> State	<u>[REDACTED]</u> Zip
<u>[REDACTED]</u> Home Phone #	<u>[REDACTED]</u> Business Phone #		
<u>[REDACTED]</u> Mobile Phone #	<u>[REDACTED]</u> Fax #		
<u>[REDACTED]</u> E-Mail Address			



# County of San Diego

COUNTY OF SAN DIEGO

2022 JAN 20 PM 1:30

CLERK OF THE BOARD  
OF SUPERVISORS

NICK MACCHIONE, FACHE  
AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY  
1600 PACIFIC HIGHWAY, ROOM 206, MAIL STOP P-501  
SAN DIEGO, CA 92101-2417  
(619) 515-6555 • FAX (619) 515-6556

PATTY KAY DANON  
CHIEF OPERATIONS OFFICER

January 7, 2022

TO: Andrew Potter  
Clerk of the Board of Supervisors

FROM: Nick Macchione, Agency Director  
Health and Human Services Agency

## APPOINTMENT TO HIV PLANNING GROUP

1. **Action Required:** Recommend the following individuals for appointment to the HIV Planning Group (HPG) by the San Diego County Board of Supervisors (Board):
  - a. Re-appoint Amy Applebaum, as Representative of individuals who formerly were federal, state, or local prisoners who were released from custody of the penal system during the preceding 3 years and had HIV/AIDS as of date of release seat, for a four (4) year term.
  - b. Appoint Pamela Highfill, as Substance Abuse Treatment Provider seat, for a four (4) year term.
2. **Background:** These individuals have been recommended for appointment by the HIV Planning Group Membership Committee and the full HPG. Approved members may serve beginning on the day of appointment by the Board. The federal government mandates an HIV Planning Group with specified representation in order to receive and administer funding through the Ryan White Treatment Extension Act of 2009.
3. **Reason for Requested Action and Impact:**
  - a. Appointment from the Board is needed.
  - b. The federal government mandates an HIV Planning Group with specified representation in order to receive and administer funding through the Ryan White Treatment Extension Act of 2009.
  - c. These appointments will ensure that the County of San Diego meets federal Ryan White Part A legislative requirements regarding key stakeholders in the HIV planning process.

Thank you for your assistance. Please contact Patrick Loose, Chief of the HIV, STD and Hepatitis Branch of Public Health Services at (619) 293-4709 if you have any questions regarding this action.

NICK MACCHIONE  
Agency Director



# San Diego County HIV Planning Group (HPG)

MEMBERSHIP APPLICATION

The mission of the HIV Planning Group is to plan for the delivery of HIV services to reduce the impact of HIV. To help us process your membership application to the HIV Planning Group, please provide all of the information requested. You may enter N/A (not applicable) where appropriate. **Please type or print clearly.** If there is any part of the application that you do not understand, please contact HIV planning group support staff at the HIV, STD and Hepatitis Branch (HSHB) of Public Health Services at: 619-293-4700.

## Section 1: Contact Information

Name: **Pamela A Highfill**

Home Address: [REDACTED]

City: [REDACTED]

State: [REDACTED]

ZIP Code: [REDACTED]

Region/Area of Residence:

CENTRAL  SOUTH BAY  EAST COUNTY  NORTH CENTRAL  NORTH COASTAL  NORTH INLAND

Home Phone Number: ( ) [REDACTED]

Current Place of Employment (if applicable): [REDACTED]

Work Address: [REDACTED]

City: [REDACTED]

State: [REDACTED]

ZIP Code: [REDACTED]

Work Phone Number: ( ) [REDACTED]

Cell Phone Number: ( ) [REDACTED]

Accept Text Messages?  Yes  No

E-mail Address:

(personal) [REDACTED]

(work) [REDACTED]

Fax Number (if available):

( ) [REDACTED]

Please be aware that the HIV Planning Group is a public body. You will receive mail and phone calls from the HIV, STD and Hepatitis Branch and members of the HIV Planning Group. Would you prefer to receive phone calls, messages, and/or e-mail at home or at work?

I prefer to receive phone calls and messages at:  Personal  Work  Cell

I prefer to receive email at:  Personal  Work

COUNTY OF SAN DIEGO  
CLERK OF THE BOARD  
2022 JAN 19 PM 1:37  
OF SUPERVISORS

COUNTY OF SAN DIEGO  
2022 JAN 19 PM 1:58  
CLERK OF THE BOARD  
OF SUPERVISORS  
updated 05/21/19