Agency Report of:
Public Official Appointments

A Public Document

California Form 806

For Official Use Only

1. Agency Name

Contra Costa County Employees' Retirement Association

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

Designated Agency Contact *(Name, Title)*

Gail Strohl, Chief Executive Officer

Area Code/Phone Number	E-mail
925–521–3960	info@cccera.org

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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
Contra Costa County Employees' Retirement Association	▶ Name **Phillips, John** *(Last, First)* Alternate, if any _____ *(Last, First)*	▶ 4 / 8 / 15 *Appt Date* ▶ indefinite *Length of Term*	▶ Per Meeting: $ 100 ▶ Estimated Annual: ☒ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ ____ *Other*
Contra Costa County Employees' Retirement Association	▶ Name **Holcombe, Jerry** *(Last, First)* Alternate, if any _____ *(Last, First)*	▶ 8 / 9 / 17 *Appt Date* ▶ indefinite *Length of Term*	▶ Per Meeting: $ 100 ▶ 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*

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	Print Name	Title	(Month, Day, Year)
(signature)	Gail Strohl	Chief Executive Officer	9/6/2017

Comment: _____