

Agency Report of: Public Official Appointments

A Public Document

1. Agency Name Cosumnes Community Services District			California Form 806 For Official Use Only
Division, Department, or Region (If Applicable) Office of the General Manager			
Designated Agency Contact (Name, Title) Elenice Gomez, District Clerk/Board Secretary			
Area Code/Phone Number 916-405-7169	E-mail elenicegomez@cosumnescsd.gov	Page 1 of 2	Date Posted: 12/29/2025 (Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
2 x 2 Assignments: City of Galt Wilton Rancheria Florin Resource EG Water Herald Fire Wilton Fire County Supervisor State Senate - 8	▶ Name <u>Lozano, Rich</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>12/17/2025</u> Appt Date ▶ <u>12 months</u> Length of Term	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: ☐ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☒ <u>7,200</u> Other _____
2 x 2 Assignments: State Assembly - 9 State Senate - 6 LAFCo SDAC	▶ Name <u>Lozano, Rich</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>12/17/2025</u> Appt Date ▶ <u>12 months</u> Length of Term	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: ☐ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☒ <u>7,200</u> Other _____
2 x 2 Assignments: City of Elk Grove City of Galt Wilton Rancheria EGUSD Herald Fire Wilton Fire County Supervisor	▶ Name <u>Sakaris, Pete</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>12/17/2025</u> Appt Date ▶ <u>12 months</u> Length of Term	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: ☐ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☒ <u>7,200</u> Other _____
2 x 2 Assignments State Assembly - 10 State Senate - 8 State Assembly - 9 State Senate - 6 US Congress	▶ Name <u>Sakaris, Pete</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>12/17/2025</u> Appt Date ▶ <u>12 months</u> Length of Term	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: ☐ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☒ <u>7,200</u> 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.

	<u>Elenice Gomez</u>	<u>District Clerk/Board Secretary</u>	<u>12/29/2025</u>
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

Comment: _____

Print

Clear

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

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

1. Agency Name

Cosumnes Community Services District

Date Posted: 12/29/2025
(Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
2 x 2 Assignments: City of Elk Grove Florin Resource EG Water EG Cosumnes Cemetery State Assembly - 10 Park Naming Committee	▶ Name <u>Spease, Angela</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>12/17/2025</u> Appt Date ▶ <u>12 months</u> Length of Term	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: ☐ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☒ <u>7,200</u> Other _____
2 x 2 Assignments: EGUSD US Congress Parks Advisory Committee	▶ Name <u>Tarango, Reina</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>12/17/2025</u> Appt Date ▶ <u>12 months</u> Length of Term	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: ☐ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☒ <u>7,200</u> Other _____
2 x 2 Assignments: EG Cosumnes Cemetery Parks Advisory Committee Park Naming Committee	▶ Name <u>Zehnder, Daniella</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>12/17/2025</u> Appt Date ▶ <u>12 months</u> Length of Term	▶ Per Meeting: \$ <u>100</u> ▶ Estimated Annual: ☐ \$0-\$1,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☒ <u>7,200</u> 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 _____