



# SONOMA COUNTY

575 ADMINISTRATION  
DRIVE, ROOM 102A  
SANTA ROSA, CA 95403

## Legislation Details (With Text)

**File #:** 2020-0932  
**Type:** Appointment **Status:** Agenda Ready  
**File created:** 9/4/2020 **In control:** Board of Supervisors District 4  
**On agenda:** 10/6/2020 **Final action:**  
**Title:** Approve the reappointment of Jenny Helman to the Advisory Council on Area Agency on Aging for a two year term beginning October 2, 2020 and ending October 2, 2022. (Fourth District)  
**Sponsors:** Board of Supervisors  
**Indexes:**  
**Attachments:** 1. Summary Report

| Date | Ver. | Action By | Action | Result |
|------|------|-----------|--------|--------|
|------|------|-----------|--------|--------|

**To:** Board of Supervisors  
**Department or Agency Name(s):** Board of Supervisors  
**Staff Name and Phone Number:** James Gore 707-565-2241  
**Vote Requirement:** Majority  
**Supervisory District(s):** Fourth District

### Recommended Action:

Approve the Reappointment of Jenny Helman to the Advisory Council on Area Agency on Aging for a two year term beginning October 2, 2020 and ending October 2, 2022. (Fourth District)

### Executive Summary:

Approve the Reappointment of Jenny Helman to the Advisory Council on Area Agency on Aging for a two year term beginning October 2, 2020 and ending October 2, 2022. (Fourth District)

### Discussion:

N/A

### Prior Board Actions:

September 11, 2018

### FISCAL SUMMARY

| Expenditures                       | FY 19-20<br>Adopted | FY20-21<br>Projected | FY 21-22<br>Projected |
|------------------------------------|---------------------|----------------------|-----------------------|
| Budgeted Expenses                  | 0                   |                      |                       |
| Additional Appropriation Requested |                     |                      |                       |
| <b>Total Expenditures</b>          | <b>0</b>            |                      |                       |
| <b>Funding Sources</b>             | n/a                 |                      |                       |
| General Fund/WA GF                 |                     |                      |                       |
| State/Federal                      |                     |                      |                       |

|                      |          |  |  |
|----------------------|----------|--|--|
| Fees/Other           |          |  |  |
| Use of Fund Balance  |          |  |  |
| Contingencies        |          |  |  |
| <b>Total Sources</b> | <b>0</b> |  |  |

**Narrative Explanation of Fiscal Impacts:**

N/A

| <b>Staffing Impacts:</b>                       |  |                           |                           |
|--|--|---------------------------|---------------------------|
| <b>Position Title (Payroll Classification)</b> | <b>Monthly Salary Range (A-I Step)</b> | <b>Additions (Number)</b> | <b>Deletions (Number)</b> |
|  |  |                           |                           |
|  |  |                           |                           |
|  |  |                           |                           |

**Narrative Explanation of Staffing Impacts (If Required):**

N/A

**Attachments:**

N/A

**Related Items "On File" with the Clerk of the Board:**