



REPORT TO
Personnel and Public Employees Committee
City of Sacramento

915 I Street, Sacramento, CA 95814-2604
www.cityofsacramento.org

Discussion Calendar
April 05, 2011

Honorable Chair and Members of
The Personnel and Public Employees Committee

Title: Review of Applications for Animal Care Services Citizens Advisory
Committee

Location/Council District: (Citywide)

Recommendation: Review applications and nominate candidates.

Contact: Katia Ligaiviu, Deputy City Clerk, (916) 808-7604, Office of the City Clerk;
Penny Cistaro, Manager, (916) 808-7433, Animal Care Services, Department of
General Services.

Presenters: None

Department: City Clerk's Office / General Services Dept.

Division: N/A

Organization No: 04001011

Description/Analysis

Issue: Review applications and/or conduct interviews to identify the most qualified candidates to nominate and forward to the Mayor for appointment.

Policy Considerations: None.

Environmental Considerations: None.

Commission/Committee Action: None.

Rational for Recommendation: To review applications to identify the most qualified individuals for nomination to the Mayor for appointment to the City's various advisory boards.

Financial Considerations: None.

Emerging Small Business Development (ESBD): None.



Respectfully Submitted by: _____

Katia Ligaiviu,
Deputy City Clerk

Recommendation Approved:



Stephanie Mizuno,
Assistant City Clerk

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Attachments

1 Available Positions / Applicant List pg. 3

ATTACHMENT 1**Background:**

The following applicants are under consideration for positions on city boards and commissions.

Board/Commission:	Animal Care Services Citizens Advisory Committee
Available Positions:	Three (3)
Category Description(s):	Category A: Licensed Veterinarian – One (1) seat Category C: Public-at-large representing the community and shall not be an animal care professional or affiliated with an animal welfare organization – Two (2) seats
Status of Incumbents:	Category A: Cynthia Delany – Resigned Category C: Becky Correia & Kris Liang – Both did not re-apply

No.	Applicant Name	District	Category	Comments
1	Michaela A. Manago	5	A	

No.	Applicant Name	District	Category	Comments
1	Jennifer J. Pokorny	3	C	
2	Kathleen Garcia	7	C	
3	Moiria Monahan	4	C	
4	Sam Delson	4	C	



City of Sacramento

Application for Appointment to Boards/Commissions and Committees

RECEIVED
CITY CLERK'S OFFICE
CITY OF SACRAMENTO

2011 MAR -8 A 8:27

INSTRUCTIONS: Provide all information requested. Attachments must be single sided on 8.5 x 11 paper. If you will be representing an organization, you must include a letter from the organization recommending you as their representative. Note: All information provided on this form is a public record. **Return this completed application form to:** Office of the City Clerk, Historic City Hall, 915 I Street, Rm. 116, Sacramento, CA 95814. Tel: (916) 808-7200.

IMPORTANT: Letters of recommendation are optional. If you choose to include a letter it must be submitted as part of this application. Letters will not be accepted after your application is filed with the City Clerk's Office.

BOARD / COMMISSION OR COMMITTEE NAME: Animal Care Services Advisory Committee

CATEGORY FOR WHICH YOU ARE APPLYING: Veterinary Technician A
Description (if applicable) Category Letter

- ☐ Name of Company/Organization Being Represented (if applicable): _____
☐ Company/Organization Authorization Letter Attached (if applicable to qualifications of category)

Applicant Name: Manago, Michael N E-Mail: _____
Last First Middle

Home Address: 53rd street, Sacramento CA 95820
Street # Street Name City State Zip

Mailing Address (if different than home address): _____
Street # Street Name City State Zip

Resident of City Council District No: _____ Business in Council District No: _____
Required If Applicable

Home Telephone: (916) . . . Business Telephone: _____

Please state the reason you would like to be a member of this board/commission (or attach):

I want to share my years of experience in the veterinary field to help better serve the animal and pet populations of Sacramento. My skills and knowledge in animal care and behavior would greatly benefit this committee.

Are you currently, or have you in the past, served on an advisory group? ☐ Yes ☒ No If yes, state the name of the group and how that service supports your application (or attach).

Do you, or an immediate family member, have any relationship (professional, financial, other) that may present a potential conflict of interest for this advisory group? ☐ Yes ☒ No If yes, please explain:

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Michaela Manago
APPLICANT NAME

BACKGROUND INFORMATION

You may also attach a resume reflecting experience, community activities or other qualifications not listed below that would be helpful to the Council in evaluating your application.

EDUCATION:

Please see attached resume

WORK EXPERIENCE: List names, addresses and dates of employment for the last five (5) years. Attach additional sheets of paper if needed.

CURRENT EMPLOYER:

Please see resume

FROM DATE:

EMPLOYER NAME:

TO DATE:

ADDRESS:

Street #

Street Name

City

State

DUTIES:

PRIOR EMPLOYER(S):

FROM DATE:

EMPLOYER NAME:

TO DATE:

ADDRESS:

Street #

Street Name

City

State

DUTIES:

FROM DATE:

EMPLOYER NAME:

TO DATE:

ADDRESS:

Street #

Street Name

City

State

DUTIES:

FROM DATE:

EMPLOYER NAME:

TO DATE:

ADDRESS:

Street #

Street Name

City

State

DUTIES:

BUSINESS ENTERPRISES: List business name including fictitious name and address of any business enterprises currently or previously owned or operated.

FROM DATE:

BUSINESS NAME:

Zoological Fabrication

TO DATE:

ADDRESS:

Street #

Street Name

City

State

5th Street, Sacramento, CA

TYPE OF BUSINESS OR SERVICE RENDERED:

Custom and design zoological exhibits.

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Michaela Manago
APPLICANT NAME

FROM DATE: BUSINESS NAME: _____

TO DATE: ADDRESS: _____
Street # Street Name City State

TYPE OF BUSINESS OR SERVICE RENDERED: _____

FELONY CONVICTIONS: A felony conviction is not necessarily a bar to appointment. Each case is considered separately based on requirements of the position. However, failure to list felony convictions may result in disqualification.

Have you ever been convicted of a felony? If yes, please indicate for each conviction, the date of the conviction, the location of the court of conviction, and the exact denomination of the offense resulting in conviction:

n/a

CIVIL ACTIONS: List each civil action, if any, in which punitive or exemplary damages have been assessed against you, indicating in each instance the date of the trial, court judgment and the location of the court which rendered the judgment:

n/a

I DECLARE, UNDER PENALTY OF PERJURY THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE:

Signature: /s/ [Signature]
Type Name if Returning Via E-Mail or Print, Sign and Mail

Date: 3/3/11

DISCLOSURE AND REGULATORY REQUIREMENTS

City Code Section 2.40.060: Conflict of Interest Disclosure - If a Statement of Economic Interests Form 700 is required for this position (see announcement), the form must be filed with the Office of the City Clerk prior to beginning service. The City Clerk will provide appointees with the filing form and instructions. Official status to serve will be delayed until the form is filed with the Office of the City Clerk.

City Code Section 2.40.010: Attendance - Board/commission members are required to attend meetings on a regular basis, and may be removed if a member does not attend three consecutive regularly scheduled meetings. If appointed, will you be able to attend meetings regularly and devote the time necessary to fulfill your duties as a member? ☒ Yes ☐ No

City Resolution 2007-653: Mandatory Ethics Training - Board/commission members are required to satisfy the local ethics training requirement mandated by Government Code Sections 53234 et seq. and may be removed if proof of attendance is not filed with the Office of the City Clerk within 60 days of appointment. Appointees will be provided with an on-line training resource. If appointed, will you be able to complete the training within 60 days? ☒ Yes ☐ No

ACCOMMODATION INFORMATION

PLEASE IDENTIFY ANY SPECIALIZED ACCOMMODATIONS NEEDED FOR EQUAL PARTICIPATION:

n/a

53rd Street
Sacramento, CA 95820

Michaela Manago

Objective

A position on the Animal Services Advisory Committee to share my experience with and knowledge of animal care and behavior to better assist animal populations in Sacramento.

Experience

2007-Present Sacramento Animal Hospital Sacramento, CA
Veterinary Technician

Animal-patient care, treatment and procedures. Develop & implement client education, training and customer service that promotes long-term relationships with clients. Lead meetings and prioritize and maintain staff and client needs.

2006-2007 Amber House Bed & Breakfast Sacramento, CA
Innkeeper

Manage and greet guest with superior hospitality and professionalism, reservations, concierge services, bookkeeping. Any miscellaneous requested tasks such as staging wedding proposals.

2004-2005 Laplante, Spinelli & Donald Sacramento, CA
Legal Secretary/Receptionist

Greet clients, manage phones, assist meetings, data entry, calendaring, inventory, dictation, preparing legal documents.

2003-2004 Aron & Associates Tucson, AZ
Legal Assistant

Prepare legal documents, outgoing calls, schedule attorneys for hearings, schedule process servers, data entry.

2001-2003 Bookman's Used Books Tucson, AZ
Visual Merchandise Coordinator

Organize, maintain, and develop creative store displays
Distribute incoming merchandise, buying and trading merchandise.

Education

2005-Present Sacramento City College Sacramento, CA
Pursuing a degree in communications for transfer to California State University, Sacramento in 2011.

1997-2001 Canyon Del Oro High School Tucson, AZ
High School Diploma

Volunteering

2009	Sacramento Food Bank	Sacramento, CA
2008	Sac Sheriff Search & Rescue- K9 Unit	Sacramento, CA
2005	Wildlife Care Association	Sacramento, CA
2004	Arizona-Sonoran Desert Museum	Tucson, AZ

References available upon request

Doctors' Hours
By Appointment
451-7213

Emergency After Hours
362-3111

SACRAMENTO ANIMAL HOSPITAL

www.sacanimalhospital.com

Fax 451-2257

5701 H Street • Sacramento, CA 95819

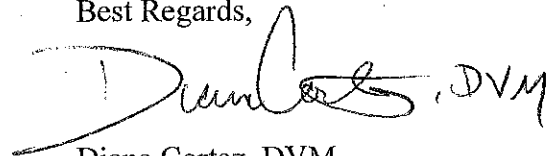
March 4, 2011

To Whom It May Concern:

I first met Michaela four years ago when she came to work at our veterinary hospital. From the start, Michaela showed a passion for learning new things and striving to improve our hospital in various ways. She is responsible for various key projects such as our quarterly newsletter and updating our website. I can honestly say that without her help, I would be at a loss. She would be an asset to any organization she were to become a part of.

Please feel free to call me if you have any questions. I am available at 916-451-7213.

Best Regards,



Diana Cortez, DVM
Sacramento Animal Hospital
Hospital Director



City of Sacramento

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CITY CLERK'S OFFICE
CITY OF SACRAMENTO

2011 MAR -7 P 3:27

Application for Appointment to Boards/Commissions and Committees

INSTRUCTIONS: Provide all information requested. Attachments must be single sided on 8.5 x 11 paper. If you will be representing an organization, you must include a letter from the organization recommending you as their representative. Note: All information provided on this form is a public record. **Return this completed application form to:** Office of the City Clerk, Historic City Hall, 915 I Street, Rm. 116, Sacramento, CA 95814. Tel: (916) 808-7200.

IMPORTANT: Letters of recommendation are optional. If you choose to include a letter it must be submitted as part of this application. Letters will not be accepted after your application is filed with the City Clerk's Office.

BOARD / COMMISSION OR COMMITTEE NAME: Animal Care Services Citizens Advisory Committee

CATEGORY FOR WHICH YOU ARE APPLYING: Public at-large C
Description (if applicable) Category Letter

☐ Name of Company/Organization Being Represented (if applicable): _____
☐ Company/Organization Authorization Letter Attached (if applicable to qualifications of category)

Applicant Name: Pokorny Jennifer J E-Mail: _____
Last First Middle
Home Address: G Street, #1 Sacramento CA 95816
Street # Street Name City State Zip
Mailing Address (if different than home address): _____
Street # Street Name City State Zip
Resident of City Council District No: Three (3) ☒ Required Business in Council District No: _____ ☒ If Applicable
Home Telephone: _____ Business Telephone: _____

Please state the reason you would like to be a member of this board/commission (or attach):

I have a genuine interest in animal welfare given that I have rescued all of my pets (2 cats, 1 dog) from shelters over the years. I recently moved to Sacramento and would like a way to be involved in the community and believe that this would be a good way to do so. It would also allow me to know more about what is going on in the community with animal care issues. Living in Atlanta for several years exposed me to the harsh realities of an overpopulation of primarily dogs and cultural differences in acceptable treatment of animals. Therefore, I would like the opportunity to be more involved in these matters and hopefully make a positive contribution to the lives of the animals.

Are you currently, or have you in the past, served on an advisory group? ☐ Yes ☒ No If yes, state the name of the group and how that service supports your application (or attach).

Do you, or an immediate family member, have any relationship (professional, financial, other) that may present a potential conflict of interest for this advisory group? ☐ Yes ☒ No If yes, please explain:

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Pokorny, Jennifer
APPLICANT NAME

BACKGROUND INFORMATION

You may also attach a resume reflecting experience, community activities or other qualifications not listed below that would be helpful to the Council in evaluating your application.

EDUCATION: 2003-2009 Emory University, Atlanta, GA Ph.D. Psychology (Neuroscience & Animal Behavior)
2007 Emory University, Atlanta, GA M.A. Psychology (Neuroscience & Animal Behavior)
1996-2000 University of Wisconsin, Madison, B.A. Anthropology & Social Welfare (double major)

WORK EXPERIENCE: List names, addresses and dates of employment for the last five (5) years. Attach additional sheets of paper if needed.

CURRENT EMPLOYER:

FROM DATE: 5/2010 EMPLOYER NAME: University of California Davis, Department of Psychiatry
TO DATE: present ADDRESS: Cousteau Place, Suite 255 Davis CA
Street # Street Name City State

DUTIES: Postdoctoral Research Fellow conducting research examining the development of brain function in children with autism using functional neuroimaging (fMRI)

PRIOR EMPLOYER(S):

FROM DATE: 10/1009 EMPLOYER NAME: Agnes Scott College, Department of Psychology
TO DATE: 5/2010 ADDRESS: 141 E. College Avenue Decatur GA
Street # Street Name City State

DUTIES: Researcher analyzing MRI brain scans

FROM DATE: 8/2003 EMPLOYER NAME: Emory University, Department of Psychology
TO DATE: 5/2009 ADDRESS: 36 Eagle Row Atlanta GA
Street # Street Name City State

DUTIES: Graduate student conducting research on social behavior in non-human primates; Teaching Assistant for several undergraduate psychology courses; Instructor for undergraduate course in Sensation and Perception

FROM DATE: EMPLOYER NAME:
TO DATE: ADDRESS: Street # Street Name City State

DUTIES:

BUSINESS ENTERPRISES: List business name including fictitious name and address of any business enterprises currently or previously owned or operated.

FROM DATE: BUSINESS NAME:
TO DATE: ADDRESS: Street # Street Name City State

TYPE OF BUSINESS OR SERVICE RENDERED:

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Pokorny, Jennifer
APPLICANT NAME

FROM DATE: BUSINESS NAME: _____

TO DATE: ADDRESS: _____
Street # Street Name City State

TYPE OF BUSINESS OR SERVICE RENDERED:

FELONY CONVICTIONS: A felony conviction is not necessarily a bar to appointment. Each case is considered separately based on requirements of the position. However, failure to list felony convictions may result in disqualification.

Have you ever been convicted of a felony? If yes, please indicate for each conviction, the date of the conviction, the location of the court of conviction, and the exact denomination of the offense resulting in conviction:
NA

CIVIL ACTIONS: List each civil action, if any, in which punitive or exemplary damages have been assessed against you, indicating in each instance the date of the trial, court judgment and the location of the court which rendered the judgment:

NA

I DECLARE, UNDER PENALTY OF PERJURY THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE:

Signature: /s/ Jennifer Pokorny Date: 3/1/11

DISCLOSURE AND REGULATORY REQUIREMENTS

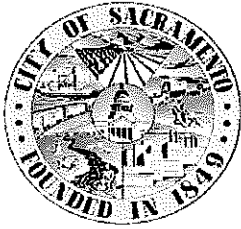
City Code Section 2.40.060: Conflict of Interest Disclosure - If a Statement of Economic Interests Form 700 is required for this position (see announcement), the form must be filed with the Office of the City Clerk prior to beginning service. The City Clerk will provide appointees with the filing form and instructions. Official status to serve will be delayed until the form is filed with the Office of the City Clerk.

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City Resolution 2007-653: Mandatory Ethics Training - Board/commission members are required to satisfy the local ethics training requirement mandated by Government Code Sections 53234 et seq. and may be removed if proof of attendance is not filed with the Office of the City Clerk within 60 days of appointment. Appointees will be provided with an on-line training resource. If appointed, will you be able to complete the training within 60 days? ☒ Yes ☐ No

ACCOMMODATION INFORMATION

PLEASE IDENTIFY ANY SPECIALIZED ACCOMMODATIONS NEEDED FOR EQUAL PARTICIPATION:



City of Sacramento

Application for Appointment to Boards/Commissions and Committees

RECEIVED
CITY CLERK'S OFFICE
CITY OF SACRAMENTO

2011 FEB 18 A 11:03

INSTRUCTIONS: Provide **all** information requested. Attachments must be single sided on 8.5 x 11 paper. If you will be representing an organization, you must include a letter from the organization recommending you as their representative. Note: All information provided on this form is a public record. **Return this completed application form to:** Office of the City Clerk, Historic City Hall, 915 I Street, Rm. 116, Sacramento, CA 95814. Tel: (916) 808-7200.

IMPORTANT: Letters of recommendation are **optional**. If you choose to include a letter it must be submitted as part of this application. Letters will not be accepted after your application is filed with the City Clerk's Office.

BOARD / COMMISSION OR COMMITTEE NAME: Animal Care Services Citizens Advisory Committee

CATEGORY FOR WHICH YOU ARE APPLYING: Member at-large

"C"

Description (if applicable)

Category Letter

☐ Name of Company/Organization Being Represented (if applicable): N/A

☐ Company/Organization Authorization Letter Attached (if applicable to qualifications of category)

Applicant Name: Garcia Kathleen nmn E-Mail: _____
Last First Middle

Home Address: Surfside Way Sacramento CA 95831
Street # Street Name City State Zip

Mailing Address (if different than home address): _____
Street # Street Name City State Zip

Resident of City Council District No: Seven (7) Business in Council District No: _____
Required If Applicable

Home Telephone: (916) Business Telephone: (916)

Please state the reason you would like to be a member of this board/commission (or attach):

Simply stated, my enormous love and respect for all animals and the desire to promote the safe, kind and humane treatment of all animals. To be a voice for those who don't have one. I have always wanted to participate in the formulation and recommendation of policies and programs that ensure quality care of animals. To provide the public with educational opportunities and information regarding proper and humane care of animals, and to illicit adoption as an option.

Are you currently, or have you in the past, served on an advisory group? ☐ Yes ☒ No If yes, state the name of the group and how that service supports your application (or attach).

N/A

Do you, or an immediate family member, have any relationship (professional, financial, other) that may present a potential conflict of interest for this advisory group? ☐ Yes ☒ No If yes, please explain:

N/A

Previously applied 2010

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Kathleen Garcia
APPLICANT NAME

BACKGROUND INFORMATION

You may also attach a resume reflecting experience, community activities or other qualifications not listed below that would be helpful to the Council in evaluating your application.

EDUCATION:

Sacramento City College (pre-nursing/general Ed), Rancho Arroyo (LVN), University of California Sacramento (RN)

WORK EXPERIENCE: List names, addresses and dates of employment for the last five (5) years. Attach additional sheets of paper if needed.

CURRENT EMPLOYER:

FROM DATE: January 2000

EMPLOYER NAME: DaVita (Dialysis) Name change from Total Renal Care

TO DATE: current

ADDRESS: Campus Commons Sacramento CA
Street # Street Name City State

DUTIES:

Staff/ charge nurse, Facility Administrator (Provide direct patient care, overall supervision and operation of facility)

PRIOR EMPLOYER(S):

FROM DATE: March 1996

EMPLOYER NAME: Total Renal Care

TO DATE: Januray 2000

ADDRESS: 300 University Avenue Sacramento CA
Street # Street Name City State

DUTIES:

RN/Facility Administrator (Direct patient care and responsible for overall operation of dialysis facility.)

FROM DATE: March 1978

EMPLOYER NAME: New West Dialysis/Total Renal Care (acquired by TRC)

TO DATE: March 1996

ADDRESS: 300 University Avenue Sacramento CA
Street # Street Name City State

DUTIES:

PCT/LVN/RN/Chg RN/Facility Administrator (Patient care, supervision, administration of facility operation)

FROM DATE:

EMPLOYER NAME:

TO DATE:

ADDRESS: Street # Street Name City State

DUTIES:

BUSINESS ENTERPRISES: List business name including fictitious name and address of any business enterprises currently or previously owned or operated.

FROM DATE:

BUSINESS NAME:

TO DATE:

ADDRESS: Street # Street Name City State

TYPE OF BUSINESS OR SERVICE RENDERED:

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Kathleen Garcia
APPLICANT NAME

FROM DATE: BUSINESS NAME: _____

TO DATE: ADDRESS: _____
Street # Street Name City State

TYPE OF BUSINESS OR SERVICE RENDERED: _____

FELONY CONVICTIONS: A felony conviction is not necessarily a bar to appointment. Each case is considered separately based on requirements of the position. However, failure to list felony convictions may result in disqualification.

Have you ever been convicted of a felony? If yes, please indicate for each conviction, the date of the conviction, the location of the court of conviction, and the exact denomination of the offense resulting in conviction:

NO

CIVIL ACTIONS: List each civil action, if any, in which punitive or exemplary damages have been assessed against you, indicating in each instance the date of the trial, court judgment and the location of the court which rendered the judgment:

NO

I DECLARE, UNDER PENALTY OF PERJURY THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE:

Signature: /s/ Kathleen Garcia Date: 02-16-2011
Type Name if Returning Via E-Mail or Print, Sign and Mail

DISCLOSURE AND REGULATORY REQUIREMENTS

City Code Section 2.40.060: Conflict of Interest Disclosure - If a Statement of Economic Interests Form 700 is required for this position (see announcement), the form must be filed with the Office of the City Clerk prior to beginning service. The City Clerk will provide appointees with the filing form and instructions. Official status to serve will be delayed until the form is filed with the Office of the City Clerk.

City Code Section 2.40.010: Attendance - Board/commission members are required to attend meetings on a regular basis, and may be removed if a member does not attend three consecutive regularly scheduled meetings. If appointed, will you be able to attend meetings regularly and devote the time necessary to fulfill your duties as a member? ☒ Yes ☐ No

City Resolution 2007-653: Mandatory Ethics Training - Board/commission members are required to satisfy the local ethics training requirement mandated by Government Code Sections 53234 et seq. and may be removed if proof of attendance is not filed with the Office of the City Clerk within 60 days of appointment. Appointees will be provided with an on-line training resource. If appointed, will you be able to complete the training within 60 days? ☒ Yes ☐ No

ACCOMMODATION INFORMATION

PLEASE IDENTIFY ANY SPECIALIZED ACCOMMODATIONS NEEDED FOR EQUAL PARTICIPATION:

None



City of Sacramento

Application for

Appointment to Boards/Commissions and Committees

RECEIVED
CITY CLERK'S OFFICE
CITY OF SACRAMENTO

2010 JAN -4 A 8:33

INSTRUCTIONS: Provide all information requested. Attachments must be single sided on 8.5 x 11 paper. If you will be representing an organization, you must include a letter from the organization recommending you as their representative. Note: All information provided on this form is a public record. **Return this completed application form to:** Office of the City Clerk, Historic City Hall, 915 I Street, Rm. 116, Sacramento, CA 95814. Tel: (916) 808-7200.

IMPORTANT: Letters of recommendation are optional. If you choose to include a letter it must be submitted as part of this application. Letters will not be accepted after your application is filed with the City Clerk's Office.

BOARD / COMMISSION OR COMMITTEE NAME: Animal Care Services Citizens' Advisory Committee

CATEGORY FOR WHICH YOU ARE APPLYING: Community
Description (if applicable)

C
Category Letter

- ☐ Name of Company/Organization Being Represented (if applicable): _____
☐ Company/Organization Authorization Letter Attached (if applicable to qualifications of category)

Applicant Name: Monahan Moira E-Mail: _____
Last First Middle

Home Address: Del Rio Rd. Sacramento CA 95822
Street # Street Name City State Zip

Mailing Address (if different than home address): _____
Street # Street Name City State Zip

Resident of City Council District No: Four (4) Business in Council District No: _____
Required If Applicable

Home Telephone: 916 Business Telephone: 916

Please state the reason you would like to be a member of this board/commission (or attach):

I care deeply about the well-being of animals in our community, and for that reason have been a volunteer at the City Animal Shelter as well as for other animal organizations. I am very active in spay/neuter efforts throughout the Sacramento area. I normally attend the Animal Care Services Citizens Advisory Committee meeting and feel that I could contribute more by being a member of the committee.

Are you currently, or have you in the past, served on an advisory group? ☐ Yes ☒ No If yes, state the name of the group and how that service supports your application (or attach).

Do you, or an immediate family member, have any relationship (professional, financial, other) that may present a potential conflict of interest for this advisory group? ☐ Yes ☒ No If yes, please explain:

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Moira Monahan
APPLICANT NAME

BACKGROUND INFORMATION

You may also attach a resume reflecting experience, community activities or other qualifications not listed below that would be helpful to the Council in evaluating your application.

EDUCATION:

Bachelor of Arts in English and Spanish, Rutgers College, New Brunswick, NJ, 1979

WORK EXPERIENCE: List names, addresses and dates of employment for the last five (5) years. Attach additional sheets of paper if needed.

CURRENT EMPLOYER:

FROM DATE: 08-01-1993

EMPLOYER NAME: CA Dept of Housing & Community Development

TO DATE: current

ADDRESS: Third St. Sacramento CA
Street # Street Name City State

DUTIES:

Section Chief of Asset Management & Compliance Branch, overseeing more than 500 rental projects

PRIOR EMPLOYER(S):

FROM DATE: 8/1/1988

EMPLOYER NAME: Settlement Housing Fund

TO DATE: 8/1/1993

ADDRESS: 1780 Broadway New York NY
Street # Street Name City State

DUTIES:

developed housing projects for low-income and very low-income families and homeless families and individuals

FROM DATE: 3/15/1981

EMPLOYER NAME: Multi-Housing News

TO DATE: 08-01-1988

ADDRESS: 1515 Broadway New York NY
Street # Street Name City State

DUTIES:

Editor in chief of monthly publication

FROM DATE:

EMPLOYER NAME:

TO DATE:

ADDRESS:
Street # Street Name City State

DUTIES:

BUSINESS ENTERPRISES: List business name including fictitious name and address of any business enterprises currently or previously owned or operated.

FROM DATE:

BUSINESS NAME:

TO DATE:

ADDRESS:
Street # Street Name City State

TYPE OF BUSINESS OR SERVICE RENDERED:

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Moira Monahan
APPLICANT NAME

FROM DATE: BUSINESS NAME: _____

TO DATE: ADDRESS: _____
Street # Street Name City State

TYPE OF BUSINESS OR SERVICE RENDERED: _____

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no

CIVIL ACTIONS: List each civil action, if any, in which punitive or exemplary damages have been assessed against you, indicating in each instance the date of the trial, court judgment and the location of the court which rendered the judgment:

none

I DECLARE, UNDER PENALTY OF PERJURY THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE:

Signature: /s/ Moira Monahan Date: 12-27-2010
Type Name if Returning Via E-Mail or Print, Sign and Mail

DISCLOSURE AND REGULATORY REQUIREMENTS

City Code Section 2.40.060: Conflict of Interest Disclosure -- If a Statement of Economic Interests Form 700 is required for this position (see announcement), the form must be filed with the Office of the City Clerk prior to beginning service. The City Clerk will provide appointees with the filing form and instructions. Official status to serve will be delayed until the form is filed with the Office of the City Clerk.

City Code Section 2.40.010: Attendance - Board/commission members are required to attend meetings on a regular basis, and may be removed if a member does not attend three consecutive regularly scheduled meetings. If appointed, will you be able to attend meetings regularly and devote the time necessary to fulfill your duties as a member? ☒ Yes ☐ No

City Resolution 2007-653: Mandatory Ethics Training - Board/commission members are required to satisfy the local ethics training requirement mandated by Government Code Sections 53234 et seq. and may be removed if proof of attendance is not filed with the Office of the City Clerk within 60 days of appointment. Appointees will be provided with an on-line training resource. If appointed, will you be able to complete the training within 60 days? ☒ Yes ☐ No

ACCOMMODATION INFORMATION

PLEASE IDENTIFY ANY SPECIALIZED ACCOMMODATIONS NEEDED FOR EQUAL PARTICIPATION:



City of Sacramento

Application for Appointment to Boards/Commissions and Committees

INSTRUCTIONS: Provide **all** information requested. Attachments must be single sided on 8.5 x 11 paper. If you will be representing an organization, you must include a letter from the organization recommending you as their representative. Note: All information provided on this form is a public record. **Return this completed application form to:** Office of the City Clerk, Historic City Hall, 915 I Street, Rm. 116, Sacramento, CA 95814. Tel: (916) 808-7200.

IMPORTANT: Letters of recommendation are **optional**. If you choose to include a letter it must be submitted as part of this application. Letters will not be accepted after your application is filed with the City Clerk's Office.

BOARD / COMMISSION OR COMMITTEE NAME: Animal Care Services Citizens Advisory Committee

CATEGORY FOR WHICH YOU ARE APPLYING: Public-at-large representing the community C
Description (if applicable) Category Letter

☐ Name of Company/Organization Being Represented (if applicable): _____
☐ Company/Organization Authorization Letter Attached (if applicable to qualifications of category)

Applicant Name: Delson Sam A E-Mail: _____
Last First Middle

Home Address: T St. Sacramento CA 95811
Street # Street Name City State Zip

Mailing Address (if different than home address): _____
Street # Street Name City State Zip

Resident of City Council District No: Four (4) Business in Council District No: _____
Required If Applicable

Home Telephone: 916 Business Telephone: 916

Please state the reason you would like to be a member of this board/commission (or attach):

I care about animals and have skills that would help the committee achieve its goals of improving care for animals at the City's Animal Care Services Center, increasing awareness of animals available for adoption, and educating the community about humane treatment of animals. I am a 16-year resident of the city and a dog owner. I am currently enrolled in the 2011 City Management Academy. I have been appointed to a city advisory committee by both Mayor Johnson and ex-Mayor Fargo. I have professional experience in public information and communications techniques and public administration. I spent 15 years as a newspaper reporter and editor and have been a government communications professional for the last 9 years. I have a master in public administration degree from Harvard and an MA in communication from Stanford.

Are you currently, or have you in the past, served on an advisory group? ☒ Yes ☐ No If yes, state the name of the group and how that service supports your application (or attach).

I am currently serving my second term as a mayoral appointee to the Transportation Program Guide CAC.

Do you, or an immediate family member, have any relationship (professional, financial, other) that may present a potential conflict of interest for this advisory group? ☐ Yes ☒ No If yes, please explain:

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Sam Delson

APPLICANT NAME

BACKGROUND INFORMATION

You may also attach a resume reflecting experience, community activities or other qualifications not listed below that would be helpful to the Council in evaluating your application.

EDUCATION:

MPA, Harvard University, 2000.

MA, Communication, Stanford University, 1999. BA, Political Science, Carleton College, 1983

WORK EXPERIENCE: List names, addresses and dates of employment for the last five (5) years. Attach additional sheets of paper if needed.

CURRENT EMPLOYER:

FROM DATE: 04-02-2007

EMPLOYER NAME: California Environmental Protection Agency, OEHHA

TO DATE: Present

ADDRESS: 1 St. Sacramento CA
Street # Street Name City State

DUTIES:

Deputy Director for External and Legislative Affairs. I am the communications director and legis. director for OEHHA.

PRIOR EMPLOYER(S):

FROM DATE: 08-30-2006

EMPLOYER NAME: Yes on Proposition 1C Campaign

TO DATE: 11-10-2006

ADDRESS: 900 J St. Sacramento CA
Street # Street Name City State

DUTIES:

Statewide communications director for campaign for \$2 billion emergency shelter and housing bond

FROM DATE: 11-29-2004

EMPLOYER NAME: Assemblymember Alberto Torrico

TO DATE: 01-08-2007

ADDRESS: State Capitol Sacramento CA
Street # Street Name City State

DUTIES:

Principal consultant and communications director for state Assemblymember.

FROM DATE: 11-04-2002

EMPLOYER NAME: Assemblymember Darrell Steinberg

TO DATE: 11-26-2004

ADDRESS: State Capitol Sacramento CA
Street # Street Name City State

DUTIES:

Principal consultant and communications director for Sacramento's state Assemblymember.

BUSINESS ENTERPRISES: List business name including fictitious name and address of any business enterprises currently or previously owned or operated.

FROM DATE:

BUSINESS NAME: _____

TO DATE:

ADDRESS: _____
Street # Street Name City State

TYPE OF BUSINESS OR SERVICE RENDERED:

CITY OF SACRAMENTO -
APPLICATION FOR APPOINTMENT

Sam Delson

APPLICANT NAME

FROM DATE:

BUSINESS NAME: _____

TO DATE:

ADDRESS: _____
Street # Street Name City State

TYPE OF BUSINESS OR SERVICE RENDERED:

FELONY CONVICTIONS: A felony conviction is not necessarily a bar to appointment. Each case is considered separately based on requirements of the position. However, failure to list felony convictions may result in disqualification.

Have you ever been convicted of a felony? If yes, please indicate for each conviction, the date of the conviction, the location of the court of conviction, and the exact denomination of the offense resulting in conviction:

No.

CIVIL ACTIONS: List each civil action, if any, in which punitive or exemplary damages have been assessed against you, indicating in each instance the date of the trial, court judgment and the location of the court which rendered the judgment:

None.

I DECLARE, UNDER PENALTY OF PERJURY THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE:

Signature: /s/ SAM A. DELSON

Date: 03-09-2011

Type Name if Returning Via E-Mail or Print, Sign and Mail

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