



CITY OF PACIFIC GROVE

AGENDA REPORT

300 Forest Avenue, Pacific Grove, California 93950

TO: Honorable Mayor and Members of the City Council
FROM: Mayor Bill Kampe
MEETING DATE: April 20, 2016
SUBJECT: Approve Nomination to Administrative Hearing Panel
CEQA: Does not constitute a "Project" under California Environmental Quality Act (CEQA) Guidelines

RECOMMENDATION

Approve the appointment to the Administrative Hearing Panel:

Jane Haines 4/20/2016 to 1/31/2018

DISCUSSION

Appointment to our boards and commissions is by nomination approved by the City Council. Municipal Code sections 3.02 and 3.04 specify the process.

Ms. Jane Haines has extensive legal experience, is a member of the bar, and has been active in city affairs. She recently completed the newly required training that the Council enabled by Resolution at our April 6 Council Meeting.

FISCAL IMPACT

No impact from the appointments.

ATTACHMENTS

1. Application of Jane Haines

Respectfully submitted:

Bill Kampe, Mayor



CITY OF PACIFIC GROVE
www.ci.pacific-grove.ca.us

Application for Appointment to a Public Board, Commission, or Committee

Persons interested in being appointed to serve on a board, commission, or committee of the City of Pacific Grove are invited to complete the following application.

Name: Jane Haines

Street Address: [REDACTED]

City: Pacific Grove

State: CA

ZIP Code: 93950

Residence Telephone Number: [REDACTED]

Work Telephone Number: [REDACTED]

E-Mail Address: [REDACTED]

Name of Board, Commission, or Committee on which you would like to serve:

Administrative Hearing Officer

Brief Description of Background and Qualifications (Additional Information May Be Attached on Separate Sheets): ATTACHMENT OF A RESUME IS DESIRABLE.

Member of the California State Bar. Member no. [REDACTED]

I hereby certify that I am a registered voter of the City of Pacific Grove (not required for EDC appointees)

Signature of Applicant: Jane Haines

Date: 4/4/16

FOR CITY USE ONLY

Appointed to: _____

Date of Appointment: _____ Expiration: _____

Date of Reappointment: _____ End of Term: _____

Date Certification of Appreciation Awarded: _____