***Submit completed worksheet to:***

*Siskiyou County Clerk, 311 Fourth St., Rm 201, Yreka, CA 96097*

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **x** |  | **Time Requested:** | **1 min** | **Meeting Date:** | **April 18, 2023** |
| ***OR*** |
| **Consent** | **[ ]**  | **Matt Parker** |
| **Contact Person/Department:** | **Flood Control/Natural Resources** | **Phone:** | **530-842-8019** |
| **Address:** |  |
| **Person Appearing/Title:** | **Matt Parker** |
| **Subject/Summary of Issue:** |
| Discussion, direction and possible action re filling one position on each of the Butte, Scott and Shasta Valley Groundwater Basin Advisory Committees for the purposes of implementing Groundwater Sustainability Plans under the Sustainable Groundwater Management Act. The attached spreadsheet lists those who applied for the following available positions and included, here, are Natural Resources’ recommendations:Butte Valley – Butte Valley – Environmental/Conservation – *VACANT-No Applicants*Shasta Valley – Private Pumper – No qualified applicantsScott Valley – Tribal Representative – Bonnie Bennett |
| **Financial Impact:** |
| **NO** | x | *Describe why no financial impact:*       |
| **YES** | [ ]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: |       |  |  |  |  |
| Fund:  |       |  | Description: |       | Org.: |       | Description: |       |
| Account: |       |  | Description: |       |  |
| Activity Code:  |       |  | Description: |       |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:*       |
|       |
| Additional Information: |       |
|       |
| **Recommended Motion:** |
| Appointments to fill various vacant positions on the Butte, Scott and Shasta Valley Groundwater Basin Advisory Committees. |
| **Reviewed as recommended by policy:** |  | ***Special Requests*:** |
| County Counsel |       |  |  |
|  |  |  | *Certified Minute Order(s)* |       | *Quantity:* |       |
| Auditor |       |  |  |  |  |  |
|  |  |  |  |  |  |
| Personnel |       |  | *Other:* |       |
| CAO |       |  |       |

***NOTE: For consideration for placement on the agenda, the original agenda worksheet and backup material must be submitted directly to the Board Clerk (after reviewing signatures have been obtained) by 10:00 a.m. on the Monday the week prior to the Board Meeting.*** Revised 8/09/2021