Agency Report of: New Positions

A Public Document

| California | 001 |
|------------|-----|
| Form | 004 |

| | Agency Contact (Last Name, First Name, Titl | e) | | ☐ Amendment Date of Original Filing: . | (month, day, year) |
|----|---|--------------------------------|-------------------------|---|-----------------------------------|
| | Area Code/Phone Number | | E-mail | | |
| 2. | New Position Information | l | | | |
| | Position Title/Classification and Job Summary | Assigned Category | OR Disclosure R | Requirement | Assuming/Start Date (Optional) |
| | | | | | Start /_ /_ d /m /yr |
| | | | 8 | | Start// d _/ m _/ yr |
| | | | | | Start / / |
| | | 1 | | | Start//////// |
| | | | | | Start /_ / |
| | | | | | Start/_ // d /m /yr |
| | | | | | Start / / d _/ m _/ yr |
| | 3. Verification I have read and understand FPPC Regaccordance with its provisions. | gulations 18701 and 18734. I f | ave verified that the c | lisclosure assignment(s) | set forth above, is in |
| | Signature Comment: (Use this space or an attachment) | Print Name | | Title | (month, day, year) |

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State and local government agencies may use this form to identify new positions that will make or participate in making governmental decisions on behalf of the agency. An individual in a newly created position must file a Statement of Economic Interests (Form 700) within 30 days of assuming office.

This form identifies the Statement of Economic Interests, Form 700, disclosure requirements for individuals serving in new positions. This form is for the agency's internal use and should be maintained by the agency in the same manner as the agency's conflict-of-interest code. For more information, refer to the FPPC website *www.fppc. ca.gov* and Regulations 18701-18702.4 and Regulation 18734.

Disclosure Requirements

- Disclosure requirements should conform to the range of duties.
- Alternatively, the agency must require an individual to file under the broadest disclosure category in the agency's conflict-of-interest code or, if the agency does not have a conflict-of-interest code, full disclosure.

Full disclosure includes reporting all investments, business positions, and interests in real property held on the date of assuming office and income received during the 12 months immediately preceding assuming office.

When a new position is added, in addition to completing this form, the agency should begin the process to amend the conflict-of-interest code.

Examples:

An agency added a new data processing manager position. The individual will be assigned the same disclosure category that the agency's other IT staff are assigned.

An agency implemented a new licensing program and a new manager position was added. Because this was a new program, the agency provided a written description of the individual's disclosure requirements which included sources subject to the licensing procedures.

An agency reorganized and changed the duties of several positions listed in the conflict-of-interest code. This form is not required as positions are not new. The agency should begin to amend its conflict-of-interest code if the range of authority and types of decisions changed.

An agency changed the titles but not the duties and responsibilities of several positions. This form is not required. The agency must file an amendment to update the conflict-of-interest code.

Instructions

Part 1

Identify the agency, contact information, and provide the amendment explanation in the comment section when applicable.

Part 2

Identify the new position(s) and describe the position's duties. Identify the disclosure by:

- Assigning an existing category(s) in the agency's code, or
- Writing a disclosure requirement.

Complete if the agency knows the employment date.

Part 3

The agency's conflict-of-interest code should identify the position that is responsible for the verification.

Example

| | | ני טס | cument | | Form OU4 |
|--|----------------------------------|---|--|--------------------------|---------------------------------|
| Agency Name (Also, Division, Depart | ment, or Region (if applicable)) | | | Amendment | |
| CA Joint Powers Authority Agency Contact (Last Name, First Name, Title) | | | | Date of Original Filing: | |
| Smith, Adam Executive Dire | | | | | (month, day, year) |
| Area Code/Phone Number | | E-m | | | |
| 555-555-5555 | | am.smith@cjp | gcjpa.ca.gov | | |
| New Position Information | | | | | |
| Position Title/Classification and Job Summary | Assigned Category | OR | Disclosure R | equirement | Assuming/Start Da (Optional) |
| Data Processing Manager (manages IT Dept) | 3 | | | | Start 3 / 3 / 3 |
| Licensing Director (duty statement attached) | | ŗ | All investme positions in entities, and | | Start 3 / 8 / j |
| | | ç | of income, ir gifts, loans, payments, fi | | Start// |
| | | that are of the type subject to licensing by the Department or are subjections. | | ensing by the | Start/_/ d /m /y |
| | | to regulation by the Department. | | Start / / / | |
| | | | Alternately written expla | | Start/_/ d /m /y |
| | | | | | Start// d /m /y |
| 3. Verification I have read and understand FPPC Reg | gulations 18701 and 18734. | I have | verified that the d | isclosure assignment(s |) set forth above, i |
| accordance with its provisions. | | | | | |
| Adam Smith | Adam Smith | | Execut | tive Director | 3-10-X (month, day, |