

**Sierra County
Board of Supervisors'
Agenda Transmittal &
Record of Proceedings**

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| MEETING DATE: January 21, 2020 | TYPE OF AGENDA ITEM: <input type="checkbox"/> Regular <input type="checkbox"/> Timed <input checked="" type="checkbox"/> Consent |
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DEPARTMENT: Clerk of the Board
APPROVING PARTY: Heather Foster
PHONE NUMBER: 530-289-3295

AGENDA ITEM: Sierra County Child Care Local Planning Council's (LPC) Certification Statement regarding composition of LP Membership.

SUPPORTIVE DOCUMENTS ATTACHED: Memo Resolution Agreement Other
Certification Statement regarding composition of LPC membership.

BACKGROUND INFORMATION:

FUNDING SOURCE:
GENERAL FUND IMPACT: No General Fund Impact
OTHER FUND:
AMOUNT: \$ N/A

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| ARE ADDITIONAL PERSONNEL REQUIRED? <input type="checkbox"/> Yes, -- -- <input checked="" type="checkbox"/> No | IS THIS ITEM ALLOCATED IN THE BUDGET? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IS A BUDGET TRANSFER REQUIRED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|---|

SPACE BELOW FOR CLERK'S USE

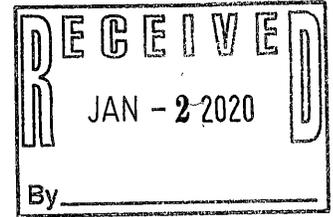
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| BOARD ACTION: <input type="checkbox"/> Approved <input type="checkbox"/> Approved as amended <input type="checkbox"/> Adopted <input type="checkbox"/> Adopted as amended <input type="checkbox"/> Denied <input type="checkbox"/> Other <input type="checkbox"/> No Action Taken | <input type="checkbox"/> Set public hearing For: _____ <input type="checkbox"/> Direction to: _____ <input type="checkbox"/> Referred to: _____ <input type="checkbox"/> Continued to: _____ <input type="checkbox"/> Authorization given to: _____ | Resolution 2020- _____ Agreement 2020- _____ Ordinance _____ Vote: Ayes: Noes: Abstain: Absent: <input type="checkbox"/> By Consensus |
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COMMENTS:

CLERK TO THE BOARD

DATE

Sierra County Child Care Council
P.O. Box 176,
Sierra City, CA 96125



December 30, 2019

Dear County Clerk,

Annually the LPC (Local Planning Council) reports to the State Department of Education about the Certification Statement Regarding Composition of LPC Membership. We have recently gotten our new Council Member, Alicia Barney appointed under the Child Care Provider position of the council.

This Statement form must be signed by the Sierra County Board of Supervisors, then the County Superintendent of Schools.

If you would please put this matter on the next board meeting, so I can circulate this form back to the Superintendent, I would greatly appreciate it. You can mail this form back to me as soon as the chairperson can sign it.

Thank you for your attention to this.

Sincerely,

Mary Wright
Coordinator, LPC
P.O. Box 176,
Sierra City, CA 96125

CERTIFICATION STATEMENT
REGARDING COMPOSITION OF LPC MEMBERSHIP

Return to:
 California Department of Education
 Child Development Division
 Local Planning Council Consultant
 1430 N. Street, Suite 3410
 Sacramento, CA 95814

Due Date:
 Annually on January 16

2019

Please complete all information requested below:

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| County Name: Sierra County | | County Coordinator Name and Telephone Number: Mary Wright | |
| Membership Categories | | | |
| 20% Consumers (Defined as a parent or person who receives, or who has received within the past 36 months, child care services.) | | | |
| Name of Representative | Address/Telephone Number | Appointment Date and Duration | |
| Barbara O'Donnell | P.O. Box 624 Downieville, CA 95936 530-289-3143 | August 3, 2010 | |
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| 20% Child Care providers (Defined as a person who provides child care services or represents persons who provide child care services.) | | | |
| Name of Representative | Address/Telephone Number | Appointment Date and Duration | |
| Alicia Barney | P.O. Box 1111 Loyalton, Ca 96118 530-927-9874 | December 2 nd , 2019 | |
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| 20% Public Agency Representative (Defined as a person who represents a city, county, or local education agency.) | | | |
| Name of Representative | Address/Telephone Number | Appointment Date and Duration | |
| Jessica Norman | 10075 Levone Ave, Suite 201 Truckee, CA 96162 530-587-5960 | April 13, 2014 | |
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Membership Categories

20% Community Representative (Defined as a person who represents an agency or business that provides private funding for child care services, or who advocates for child care services through participation in civic or community-based organizations but is not a child care provider or CDE funded agency representative.)

| Name of Representative | Address/Telephone Number | Appointment Date and Duration |
|------------------------|--|-------------------------------|
| Laurie Marsh | P.O. Box 7 Loyalton, CA 96118 530-993-6745 | January 3, 1012 |
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20% Discretionary Appointees (Appointed from any of the above categories or outside of these categories at the discretion of the appointing agencies.)

| Name of Representative | Address/Telephone Number | Appointment Date and Duration |
|------------------------|---------------------------------------|-------------------------------|
| Louise Huebner | P.O. Box 349 Sierra City, CA 96125 | January 8, 2013 |
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Authorized Signatures

We hereby verify as the authorized representatives of the county board of supervisors (CBS), the county superintendent of schools (CSS), and the Local Child Care and Development Planning Council (LPC) chairperson that as of 1/16/2017^(Date), the above identified individuals meet the council representation categories as mandated in AB 1542 (Chapter 270, Statutes 1997; California *Education Code* Section 8499.3). Further, the CBS, CSS, and LPC chairperson verify that a good faith effort has been made by the appointing agencies to ensure that the ethnic, racial, and geographic composition of the LPC is reflective of the population of the county.

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| Authorized Representative - County Board of Supervisors | Telephone Number | Date |
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| Authorized Representative - County Superintendent of Schools | Telephone Number | Date |
| | | |
| Local Child Care Planning Council Chairperson | Telephone Number | Date |
| Louise Huebner | 530-8621004 | |