

BCC NAME SOLID WASTE HEARING PANEL, SAN DIEGO COUNTY

COUNTY DEPARTMEN Environmental Health Services **CONTACT PERSO** Theresa Vargas

PHONE NUMBER (619) 338-2375 **MAILSTOP** D561 **FAX NUMBER** (619) 338-2174

E-Mail Address:

MEMBER NAME Horn, Bill

APPOINTMENT 1/9/2001 **MO#** 1 **EXPIRATION** **TERM** 2-YEARS

NOMINATED BY Board of Supervisors **APPOINTED BY** Board of Supervisors

REQUIREMENT SUPERVISOR **COMMENTS**

MEMBER NAME Shuster, Bob

APPOINTMENT 2/8/2005 **MO#** 20 **EXPIRATION** 1/31/2007 **TERM** 2-YEARS

NOMINATED BY Board of Supervisors **APPOINTED BY** Board of Supervisors

REQUIREMENT General Public Representative **COMMENTS** 1 Appt. 2/8/05 (20)

MEMBER NAME Tobiason, Victoria B.

APPOINTMENT 3/22/2005 **MO#** 29 **EXPIRATION** 3/22/2007 **TERM** 2-YEARS

NOMINATED BY SAN DIEGO COUNTY DISPOSAL ASSOCIATION **APPOINTED BY** Board of Supervisors

REQUIREMENT SAN DIEGO COUNTY DISPOSAL ASSOCIATION REP **COMMENTS** 1st Term