

P:\BDS.COM\BC Appointment form for Department

## BOARD OF SUPERVISORS

Date:	March 15, 2016
To:	Each Member, Board of Supervisors
From:	Supervisor Keith Carson
Subject:	Human Relations Commission
It is my recon	nmendation that your Board accept the appointment of:
	<u>Kohan Sharam</u> (Name of Appointee)
	Human Relations Commission (Name of Board or Commission)
The vacancy	was created by:  resignation (attached) expiration of term, reappointment vacancy other (information attached)
This appointe	ee is replacing:(seat # or name of current seat holder - if applicable)
Qualification	s for appointment: See Resume Attached
Staff Contact:	Amy Phone Number: 26685
	Appointee's Contact Information (if applicable)
Home Addre	ss: City: Emeryville Zip Code: 94608
Telephone N	umber: (home) (cell)
Email addres	s:
cc: Clerk, Bo	ard of Supervisors