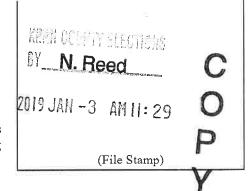
STATEMENT OF FACT BY PUBLIC AGENCY

JAN 1 4 2019

ROSTER OF PUBLIC AGENCIES (Government Code Sections 53050-53051)

If the name of the agency is being changed, or if two or more previously recorded agencies are consolidating into one, please indicate the full information at the bottom of this filing form, listing all agency names involved.



1. Full legal name of agency: Frazier Park Public Utility District	
2. Official mailing address of governing body of agency: PO Box 1525, Frazier Park, CA 93225	
5	Phone No: 661-245-3734
Email:fppud1@gmsil.com Fax No:	
3. Name and address of each member of governing body of agence	
Name Gerald Garcia-Member at Large (Seat 1)	Name Terry Kelling-President (Seat 5)
Residence Address	Residence Address
Mailing Address PO Box 1525	Mailing Address PO Box 1525
City Frazier Park State CA Zip 93225	City Frazier Park State CA Zip 93225
Date Term Expires 12/02/2020	Date Term Expires
Name Rebecca Gipson-Vice President (Seat 2)	Name
Residence Address	Residence Address
Mailing Address PO Box 1525	Mailing Address
City Frazier Park State CA Zip 93225	City State Zip
Date Term Expires 12/03/2022	Date Term Expires
Name Brahma Neyman-Treasurer (Seat 3)	Name
Residence Address	Residence Address
Mailing Address PO Box 1525	Mailing Address
City Frazier Park State CA Zip 93225	City State Zip
Date Term Expires 12/02/2020	Date Term Expires
Name Lisa Schoenberg-Sec./JPIA Rep (Seat 4)	Name
Residence Address	Residence Address
Mailing Address PO Box 1525	Mailing Address
City Frazier Park State CA Zip 93225	City State Zip
Date Term Expires 12/03/2022 Date Term Expires	
4. Name of chairman, president or other presiding officer of gove Name of Officer:	
Address (if not listed above):	City State Zip
5. Name of clerk of governing body:Tiffany Matte	/Box 1525, Fraz Prk,CA 93225
Name (if no Clerk, inser	t word "None") Res/Mailing Address (if not listed above)
6. Name of Secretary of governing body:	
Name (if no Secretary, insert word "None") Res/Mailing Address (if not listed above)	
Statement dated thisday ofday of, 20 18	
Statement prepared by: Tiffany Matte Clerk of the Board	
Finted Name	Title 661–245–3734
Preparer's Signature:	Contact Number:
Please note the following changes or consolidations:	