

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name

City of West Covina

Division, Department, or Region (If Applicable)

City Manager's Office

Designated Agency Contact (Name, Title)

Chris Freeland, City Manager

Area Code/Phone Number

626-939-8401

E-mail

chris.freeland@westcovina.org

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CITY OF WEST COVINA
CITY CLERK'S OFFICE

California Form **806**

For Official Use Only

Date Posted:

11/30/2017

(Month, Day, Year)

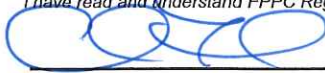
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2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Foothill Transit Board	<p>▶ Name <u>Warshaw, Corey</u> <small>(Last, First)</small></p> <p>Alternate, if any <u>Toma, James</u> <small>(Last, First)</small></p>	<p>▶ <u>12 / 5 / 17</u> <small>Appt Date</small></p> <p>▶ <u>Annual</u> <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ <u>152.00</u></p> <p>▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u></p>
San Gabriel Valley Council of Governments	<p>▶ Name <u>Spence, Mike</u> <small>(Last, First)</small></p> <p>Alternate, if any <u>Toma, James</u> <small>(Last, First)</small></p>	<p>▶ <u>12 / 5 / 17</u> <small>Appt Date</small></p> <p>▶ <u>Annual</u> <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ <u>50.00</u></p> <p>▶ Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u></p>
San Gabriel Valley Mosquito and Vector Control District	<p>▶ Name <u>Spence, Mike</u> <small>(Last, First)</small></p> <p>Alternate, if any <u>N/A</u> <small>(Last, First)</small></p>	<p>▶ <u>12 / 5 / 17</u> <small>Appt Date</small></p> <p>▶ <u>Two Years</u> <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ <u>100.00</u></p> <p>▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u></p>
Los Angeles County Sanitation District	<p>▶ Name <u>Spence, Mike</u> <small>(Last, First)</small></p> <p>Alternate, if any <u>Johnson, Lloyd</u> <small>(Last, First)</small></p>	<p>▶ <u>12 / 5 / 17</u> <small>Appt Date</small></p> <p>▶ <u>Annual</u> <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ <u>375.00</u></p> <p>▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>4,500</u> <small>Other</small></p>

3. Verification

I have read and understand FPPC Regulation 18702.5. I have verified that the appointment and information identified above is true to the best of my information and belief.



Signature of Agency Head or Designee

Chris Freeland

Print Name

City Manager

Title

11/30/17

(Month, Day, Year)

Comment: _____