

**Agency Report of:
Public Official Appointments**

A Public Document


1. Agency Name City of Rosemead		RECIEVED CITY OF ROSMEAD MAY 02 2017 CITY CLERK'S OFFICE BY: <u>NO</u>	California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Marc Donohue, City Clerk		Page <u>1</u> of <u>2</u>	Date Posted: May 2, 2017 <small>(Month, Day, Year)</small>
Area Code/Phone Number (626) 569-2171	E-mail mdonohue@cityofrosemead.org		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Los Angeles Sanitation District No. 15	Name <u>Low, Polly</u> <small>(Last, First)</small> Alternate, if any <u>Ly, Steven</u> <small>(Last, First)</small>	<u>04 / 25 / 17</u> <small>Appt Date</small> 1 year <small>Length of Term</small>	Per Meeting: \$ <u>125.00</u> 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"/> Other
San Gabriel Valley Council of Governments	Name <u>Clark, Margaret</u> <small>(Last, First)</small> Alternate, if any <u>Ly, Steven</u> <small>(Last, First)</small>	<u>04 / 25 / 17</u> <small>Appt Date</small> 1 year <small>Length of Term</small>	Per Meeting: \$ <u>50</u> 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"/> Other
San Gabriel Valley Mosquito & Vector Control District	Name <u>Alarcon, William</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	<u>11 / 10 / 15</u> <small>Appt Date</small> 2 years <small>Length of Term</small>	Per Meeting: \$ <u>100</u> 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"/> Other
Southern California Association of Governments	Name <u>Clark, Margaret</u> <small>(Last, First)</small> Alternate, if any <u>Alarcon, William</u> <small>(Last, First)</small>	<u>04 / 25 / 17</u> <small>Appt Date</small> 1 year <small>Length of Term</small>	Per Meeting: \$ <u>120.00</u> 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"/> Other

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.


Marc Donohue
City Clerk
05/02/17
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____

**Agency Report of:
Public Official Appointments
Continuation Sheet**

1. Agency Name City of Rosemead	Date Posted: <u>May 2, 2017</u> <i>(Month, Day, Year)</i>
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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
California JPIA	▶ Name <u>Armenta, Sandra</u> <i>(Last, First)</i> Alternate, if any <u>Low, Polly</u> <i>(Last, First)</i>	▶ <u>04 / 25 / 17</u> <i>Appt Date</i> ▶ <u>1 year</u> <i>Length of Term</i>	▶ Per Meeting: \$ <u>100.00</u> ▶ 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>
	▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i>	▶ ____ / ____ / ____ <i>Appt Date</i> ▶ _____ <i>Length of Term</i>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input 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>
	▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i>	▶ ____ / ____ / ____ <i>Appt Date</i> ▶ _____ <i>Length of Term</i>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input 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>
	▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i>	▶ ____ / ____ / ____ <i>Appt Date</i> ▶ _____ <i>Length of Term</i>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input 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>
	▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i>	▶ ____ / ____ / ____ <i>Appt Date</i> ▶ _____ <i>Length of Term</i>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input 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>
	▶ Name _____ <i>(Last, First)</i> Alternate, if any _____ <i>(Last, First)</i>	▶ ____ / ____ / ____ <i>Appt Date</i> ▶ _____ <i>Length of Term</i>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input 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>