

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name City of Torrance		California Form 806	For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Rebecca Poirier, City Clerk		Date Posted: <u>7/20/16</u> <small>(Month, Day, Year)</small>	
Area Code/Phone Number 310-618-2870	E-mail CityClerk@TorranceCA.Gov		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Sanitation District of Los Angeles	▶ Name <u>Furey, Patrick J.</u> <small>(Last, First)</small> Alternate, if any <u>Rizzo, Geoff</u> <small>(Last, First)</small>	▶ <u>7/19/16</u> <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ <u>187.50</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"/> _____ <small>Other</small>
Southern California Association of Governments	▶ Name <u>Furey, Patrick J.</u> <small>(Last, First)</small> Alternate, if any <u>Ashcraft, Heidi Ann</u> <small>(Last, First)</small>	▶ <u>7/19/16</u> <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ <u>120.00</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"/> _____ <small>Other</small>
West Vector Control	▶ Name <u>Weideman, Kurt</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12/23/14</u> <small>Appt Date</small> ▶ <u>12/23/16</u> <small>Length of Term</small>	▶ 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"/> _____ <small>Other</small>
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ _____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ 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"/> _____ <small>Other</small>

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.

 <small>Signature of Agency Head or Designee</small>	<u>Rebecca Poirier</u> <small>Print Name</small>	<u>City Clerk</u> <small>Title</small>	<u>7/19/16</u> <small>(Month, Day, Year)</small>
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Comment: _____