

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name City of Rancho Palos Verdes			California Form	806	
Division, Department, or Region (If Applicable)			For Official Use Only		
Designated Agency Contact (Name, Title) Teresa Takaoka, Acting City Clerk					
Area Code/Phone Number 310-544-5217	E-mail terit@rpvca.gov	Page <u>1</u> of <u>1</u>	Date Posted: <u>12/21/16</u> <small>(Month, Day, Year)</small>		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Sanitation Districts (District No. 5 & South Bay Sanitation District)	▶ Name <u>Brooks, Susan</u> <small>(Last, First)</small> Alternate, if any <u>Misetich, Anthony</u> <small>(Last, First)</small>	▶ <u>12 / 20 / 16</u> <small>Appt Date</small> ▶ <u>1 year</u> <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"/> <u>Other</u>
Los Angeles County West Vector Control District	▶ Name <u>Sala, Elizabeth</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>08 / 16 / 16</u> <small>Appt Date</small> ▶ <u>2 years</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</u> ▶ 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 _____ <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"/> <u>Other</u>
	▶ 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"/> <u>Other</u>

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>	Doug Willmore _____ <small>Print Name</small>	City Manager _____ <small>Title</small>	12/21/16 _____ <small>(Month, Day, Year)</small>
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Comment: _____