

**Agency Report of:
Public Official Appointments**

A Public Document


1. Agency Name City of Monterey Park		CITY CLERK OFFICE	California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)		2013 JUN -6 P 4:03	
Designated Agency Contact (Name, Title) Vincent D. Chang, City Clerk		CITY OF MONTEREY PARK	
Area Code/Phone Number 626-307-1359	E-mail mpclerk@montereypark.ca.gov	Page <u>1</u> of <u>1</u>	Date Posted: <u>6/6/13</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
Los Angeles County Sanitation District	▶ Name <u>Real Sebastian, Teresa</u> <small>(Last, First)</small> Alternate, if any <u>Wong, Anthony</u> <small>(Last, First)</small>	▶ <u>4 / 10 / 13</u> <small>Appt Date</small> ▶ <u>9 1/2 mo.</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"/> Other
San Gabriel Valley Council of Governments	▶ Name <u>Real Sebastian, Teresa</u> <small>(Last, First)</small> Alternate, if any <u>Wong, Anthony</u> <small>(Last, First)</small>	▶ <u>5 / 1 / 13</u> <small>Appt Date</small> ▶ <u>1 yr.</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>50.00</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"/> Other
San Gabriel Valley Mosquito & Vector Control District	▶ Name <u>Leon, Joseph</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>5 / 1 / 13</u> <small>Appt Date</small> ▶ <u>1 yr.</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 checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u> / / </u> <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"/> Other

3. Verification

I have read and understand FPPC Regulation 18705.5. 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	Vincent D. Chang Print Name	City Clerk Title	<u>6/8/13</u> (Month, Day, Year)
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Comment: _____