

**Agency Report of:
Public Official Appointments**

Public Document

1. Agency Name City of Monterey Park		CITY CLERK OFFICE 2017 MAY 10 P 12:45 CITY OF MONTEREY PARK	California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)			Date Posted: 5/9/17 (Month, Day, Year)
Designated Agency Contact (Name, Title) Vincent D. Chang, City Clerk		Page <u>1</u> of <u>1</u>	
Area Code/Phone Number 626-307-1359	E-mail mpclerk@montereypark.ca.gov		

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>Lam, Stephen</u> <small>(Last, First)</small>	▶ <u>3 / 14 / 17</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>Ing, Mitchell</u> <small>(Last, First)</small>	▶ <u>4 / 5 / 17</u> <small>Appt Date</small> ▶ <u>1 yr.</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>50.00</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 Mosquito & Vector Control District	▶ Name <u>Leon, Joseph</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>4 / 5 / 17</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
League of California Cities	▶ Name <u>Chan, Peter</u> <small>(Last, First)</small> Alternate, if any <u>Lam, Stephen</u> <small>(Last, First)</small>	▶ <u>4 / 5 / 17</u> <small>Appt Date</small> ▶ <u>1 yr.</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>travel reimbursement only</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

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	<u>Vincent D. Chang</u> Print Name	<u>City Clerk</u> Title	<u>5/9/17</u> (Month, Day, Year)
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Comment: _____