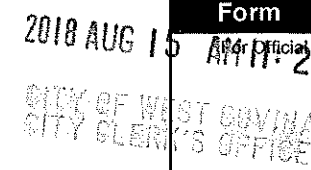


**Agency Report of:
Public Official Appointments**

A Public Document


1. Agency Name City of West Covina			California Form 806 <small>For Official Use Only</small>
Division, Department, or Region (If Applicable) City Manager's Office			
Designated Agency Contact (Name, Title) Chris Freeland, City Manager			
Area Code/Phone Number 626-939-8401	E-mail chris.freeland@westcovina.org	Page <u>1</u> of <u>1</u>	Date Posted: 8/15/18 <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
Foothill Transit Board	▶ Name <u>Warshaw, Corey</u> <small>(Last, First)</small> Alternate, if any <u>Toma, James</u> <small>(Last, First)</small>	▶ <u>12 / 5 / 17</u> <small>Appt Date</small> ▶ <u>Annual</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>152.00</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>Toma, James</u> <small>(Last, First)</small> Alternate, if any <u>Johnson, Lloyd</u> <small>(Last, First)</small>	▶ <u>6 / 7 / 18</u> <small>Appt Date</small> ▶ <u>Annual</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 and Vector Control District	▶ Name <u>Spence, Mike</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1 / 1 / 18</u> <small>Appt Date</small> ▶ <u>2 Year</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
Los Angeles County Sanitation District	▶ Name <u>Johnson, Lloyd</u> <small>(Last, First)</small> Alternate, if any <u>Wu, Tony</u> <small>(Last, First)</small>	▶ <u>6 / 7 / 18</u> <small>Appt Date</small> ▶ <u>Annual</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>375.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>\$4500</u> <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.

	Chris Freeland	City Manager	8/15/18
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: Changes made mid-term due to change in Council leadership.