

**Agency Report of:
Public Official Appointments**

A Public Document

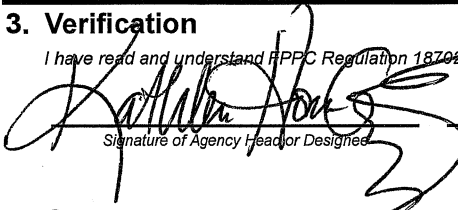
1. Agency Name		California Form 806 For Official Use Only Received DEC 18 2023 Lomita City Clerk's Office Date Filed: <u>12/20/2023</u> <small>(Month, Day, Year)</small>
City of Lomita		
Division, Department, or Region (If Applicable) City Council		
Designated Agency Contact (Name, Title) Kathleen Gregory, City Clerk		
Area Code/Phone Number 310-325-7110	E-mail k.gregory@lomitacity.com	Page <u>1</u> of <u>1</u>

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 No. 5	▶ Name <u>Gazeley, James</u> <small>(Last, First)</small> Alternate, if any <u>Bill Uphoff</u> <small>(Last, First)</small>	▶ <u>12 / 05 / 23</u> <small>Appt Date</small> ▶ <u>1 yr</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>125.00</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"/> <u>Other</u>
Joint Powers Insurance Authority	▶ Name <u>Waronek, Mark</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 5 / 23</u> <small>Appt Date</small> ▶ <u>1 yr</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"/> <u>Other</u>
Los Angeles County Vector Control	▶ Name <u>Gazeley, James</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 5 / 23</u> <small>Appt Date</small> ▶ <u>1 yr</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"/> <u>Other</u>
Southern California Association of Governments	▶ Name <u>Gazeley, James</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>12 / 5 / 23</u> <small>Appt Date</small> ▶ <u>1 yr</u> <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"/> <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.


Kathleen Horn Gregory
City Clerk
12-18-2023
Signature of Agency Head or Designee
Print Name
Title
(Month, Day, Year)

Comment: _____