Agency Report of:
Public Official Appointments

A Public Document

1. Agency Name

City of Seal Beach

Division, Department, or Region *(If Applicable)*

City Council

Designated Agency Contact *(Name, Title)*

Robin Roberts, City Clerk

Area Code/Phone Number: 562-431-2527 x1305

E-mail: rroberts@sealbeachca.gov

California Form **806**

For Official Use Only

Date Posted: 1/26/18 *(Month, Day, Year)*

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
California Joint Powers Insurance Authority (CJPIA)	Name: Varipapa, Mike *(Last, First)* Alternate, if any: Ingram, Jill *(Last, First)*	Appt Date: 1 / 22 / 18 Length of Term: 1 Year	Per Meeting: $ 100.00 Estimated Annual: ☒ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ Other
Orange County Fire Authority (OCFA)	Name: Deaton, Ellery *(Last, First)* Alternate, if any: N/A *(Last, First)*	Appt Date: 1 / 22 / 18 Length of Term: 1 Year	Per Meeting: $ 100.00 Estimated Annual: ☒ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ Other
Orange County Sanitation District, Board of Directors	Name: Deaton, Ellery *(Last, First)* Alternate, if any: Massa-Lavitt, Sandra *(Last, First)*	Appt Date: 1 / 22 / 18 Length of Term: 1 Year	Per Meeting: $ 212.50 Estimated Annual: ☒ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ Other
Orange County Vector Control Board	Name: Massa-Lavitt, Sandra *(Last, First)* Alternate, if any: N/A *(Last, First)*	Appt Date: 1 / 9 / 17 Length of Term: 4 Years	Per Meeting: $ 100.00 Estimated Annual: ☒ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ Other

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.

Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)
Rob Roberts	Robin L. Roberts	City Clerk	1/26/18

Comment: Appointments made by City Council Resolution No. 6783 adopted 1/22/18

Agency Report of: Public Official Appointments Continuation Sheet

California Form 806
A Public Document

1. Agency Name

City of Seal Beach

Date Posted: 1/26/18 (Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
West Orange County Water Board	Name: Sustarsic, Schelly (Last, First) Alternate, if any: Massa-Lavitt, Sandra (Last, First)	1 / 22 / 18 Appt Date 1 Year Length of Term	Per Meeting: $ 100.00 Estimated Annual: ☒ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ ____ Other
	Name: ____ (Last, First) Alternate, if any: ____ (Last, First)	__/__/__ Appt Date ____ Length of Term	Per Meeting: $ ____ Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ ____ Other
	Name: ____ (Last, First) Alternate, if any: ____ (Last, First)	__/__/__ Appt Date ____ Length of Term	Per Meeting: $ ____ Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ ____ Other
	Name: ____ (Last, First) Alternate, if any: ____ (Last, First)	__/__/__ Appt Date ____ Length of Term	Per Meeting: $ ____ Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ ____ Other
	Name: ____ (Last, First) Alternate, if any: ____ (Last, First)	__/__/__ Appt Date ____ Length of Term	Per Meeting: $ ____ Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ ____ Other
	Name: ____ (Last, First) Alternate, if any: ____ (Last, First)	__/__/__ Appt Date ____ Length of Term	Per Meeting: $ ____ Estimated Annual: ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ ____ Other