

**Agency Report of:  
Public Official Appointments**

**A Public Document**

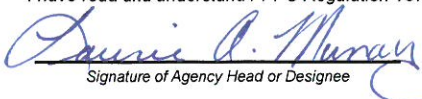
<b>1. Agency Name</b> City of La Palma		<b>California Form 806</b> For Official Use Only
Division, Department, or Region (If Applicable)		
Designated Agency Contact (Name, Title) Laurie A. Murray, CMC, City Clerk		
Area Code/Phone Number 714-690-3338	E-mail lauriem@cityoflapalma.org	Date Posted: 04/09/2014 <small>(Month, Day, Year)</small>
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**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	Name <u>Charoen, G. Henry</u> <small>(Last, First)</small> Alternate, if any <u>Shanahan, Steve</u> <small>(Last, First)</small>	<u>1 / 21 / 14</u> <small>Appt Date</small>  <u>1 Year</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"/> Other
Orange County Fire Authority	Name <u>Goedhart, Gerard</u> <small>(Last, First)</small> Alternate, if any <u>Kim, Peter</u> <small>(Last, First)</small>	<u>1 / 21 / 14</u> <small>Appt Date</small>  <u>1 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 type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>\$3,600</u> <small>Other</small>
Orange County Sanitation District	Name <u>Kim, Peter</u> <small>(Last, First)</small> Alternate, if any <u>Goedhart, Gerard</u> <small>(Last, First)</small>	<u>1 / 21 / 14</u> <small>Appt Date</small>  <u>1 Year</u> <small>Length of Term</small>	Per Meeting: \$ <u>212.50</u>  Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Orange County Vector Control District	Name <u>Hwangbo, Steve</u> <small>(Last, First)</small> Alternate, if any <u>none</u> <small>(Last, First)</small>	<u>1 / 21 / 14</u> <small>Appt Date</small>  <u>2 Years</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

**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

Laurie A. Murray, CMC  
Print Name

City Clerk  
Title

04/09/2014  
(Month, Day, Year)

Comment: \_\_\_\_\_