

**Agency Report of:
Public Official Appointments**

A Public Document


1. Agency Name City of Santa Clarita			California Form 806 For Official Use Only
Division, Department, or Region (If Applicable) Information Services			Date Posted: <u>04/08/2024</u> <small>(Month, Day, Year)</small>
Designated Agency Contact (Name, Title) Mary Cusick, City Clerk			
Area Code/Phone Number (661) 255-4391	E-mail mcusick@santa-clarita.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
Sanitation Districts of Los Angeles County	▶ Name <u>Smyth, Cameron</u> <small>(Last, First)</small> Alternate, if any <u>Weste, Laurene</u> <small>(Last, First)</small>	▶ <u>01 / 23 / 24</u> <small>Appt Date</small> ▶ <u>HS Code 4700</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>
California Joint Powers Insurance Authority (CJPIA)	▶ Name <u>McLean, Marsha</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 24 / 23</u> <small>Appt Date</small> ▶ _____ <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 Transportation Committee (appoint. through position-N. County Transportation Coalition and SFVCOG)	▶ Name <u>McLean, Marsha</u> <small>(Last, First)</small> Alternate, if any <u>Gibbs, Jason</u> <small>(Last, First)</small>	▶ <u>01 / 24 / 23</u> <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</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>
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ _____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input 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.

	Kenneth W. Striplin	City Manager	04/08/2024
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: _____