

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name City of West Hollywood		California Form 806	For Official Use Only
Division, Department, or Region <i>(If Applicable)</i> City Clerk Division			
Designated Agency Contact <i>(Name, Title)</i> Yvonne Quarker, City Clerk		Date Posted: 05/18/16 <small><i>(Month, Day, Year)</i></small>	
Area Code/Phone Number 323-848-6409	E-mail yquarker@weho.org		

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 4	▶ Name <u>Meister, Lauren</u> <small><i>(Last, First)</i></small> Alternate, if any <u>Horvath, Lindsey</u> <small><i>(Last, First)</i></small>	▶ <u>05 / 02 / 16</u> <small><i>Appt Date</i></small> ▶ <u>1 year</u> <small><i>Length of Term</i></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> </u> <small><i>Other</i></small>
	▶ Name _____ <small><i>(Last, First)</i></small> Alternate, if any _____ <small><i>(Last, First)</i></small>	▶ <u> / / </u> <small><i>Appt Date</i></small> ▶ _____ <small><i>Length of Term</i></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> </u> <small><i>Other</i></small>
	▶ Name _____ <small><i>(Last, First)</i></small> Alternate, if any _____ <small><i>(Last, First)</i></small>	▶ <u> / / </u> <small><i>Appt Date</i></small> ▶ _____ <small><i>Length of Term</i></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> </u> <small><i>Other</i></small>
	▶ Name _____ <small><i>(Last, First)</i></small> Alternate, if any _____ <small><i>(Last, First)</i></small>	▶ <u> / / </u> <small><i>Appt Date</i></small> ▶ _____ <small><i>Length of Term</i></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> </u> <small><i>Other</i></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.

 <small>Signature of Agency Head or Designee</small>	Yvonne Quarker <small>Print Name</small>	City Clerk <small>Title</small>	5/18/16 <small>(Month, Day, Year)</small>
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Comment: _____