

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name

City of Monte Sereno

Division, Department, or Region (If Applicable)

Designated Agency Contact (Name, Title)

ANDREA M. CHLEMENGOS, CITY CLERK

Area Code/Phone Number

4-8-354-8647

E-mail

ANDREA@CITYOFMONTESERENO.ORG

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JAN 14 2016

**CITY OF
MONTE SERENO**

Date Posted:

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1/14/2016

(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 VALLEY SANITATION DISTRICT	<p>▶ Name <u>MARSHALL ANSTANDIG</u> <small>(Last, First)</small></p> <p>Alternate, if any <u>WALTER HUFF</u> <small>(Last, First)</small></p>	<p>▶ <u>12 / 15 / 16</u> <small>Appt Date</small></p> <p>▶ <u>1 YEAR</u> <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ <u>150.00</u></p> <p>▶ Estimated Annual:</p> <p><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u></p>
	<p>▶ Name _____ <small>(Last, First)</small></p> <p>Alternate, if any _____ <small>(Last, First)</small></p>	<p>▶ <u> / /</u> <small>Appt Date</small></p> <p>▶ _____ <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ _____</p> <p>▶ Estimated Annual:</p> <p><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u></p>
	<p>▶ Name _____ <small>(Last, First)</small></p> <p>Alternate, if any _____ <small>(Last, First)</small></p>	<p>▶ <u> / /</u> <small>Appt Date</small></p> <p>▶ _____ <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ _____</p> <p>▶ Estimated Annual:</p> <p><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u></p>
	<p>▶ Name _____ <small>(Last, First)</small></p> <p>Alternate, if any _____ <small>(Last, First)</small></p>	<p>▶ <u> / /</u> <small>Appt Date</small></p> <p>▶ _____ <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ _____</p> <p>▶ Estimated Annual:</p> <p><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u></p>

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

ANDREA M. CHELEMENGOS

Print Name

CITY CLERK

Title

1/14/2016 ✓

(Month, Day, Year)

Comment: _____