

# Agency Report of: Public Official Appointments

A Public Document

|  |  |                           |  |
|--|--|---------------------------|--|
| <b>1. Agency Name</b><br>City of Signal Hill   |  |                           | <b>California Form 806</b><br>For Official Use Only                    |
| <b>Division, Department, or Region (If Applicable)</b><br>City Council                             |  |                           |  |
| <b>Designated Agency Contact (Name, Title)</b><br>Kim Boles, Executive Assistant/Deputy City Clerk |  |                           |  |
| <b>Area Code/Phone Number</b><br>562-989-7305  | <b>E-mail</b><br>kboles@cityofsignalhill.org | Page <u>1</u> of <u>3</u> | <b>Date Posted:</b><br>05/01/2020<br><small>(Month, Day, Year)</small> |

## 2. Appointments

| Agency Boards and Commissions | Name of Appointed Person  | Appt Date and Length of Term  | Per Meeting/Annual Salary/Stipend   |
|-------------------------------|---|---|---|
| Sanitation District No. 29    | ▶ Name <u>Robert D. Copeland</u><br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small> | ▶ <u>05 / 01 / 20</u><br><small>Appt Date</small><br><br><u>8 months</u><br><small>Length of Term</small> | ▶ Per Meeting: \$ <u>125.00</u><br><br>▶ Estimated Annual:<br><input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>          </u><br><small>Other</small> |
| Sanitation District No. 29    | ▶ Name <u>Tina L. Hansen</u><br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small>     | ▶ <u>05 / 01 / 20</u><br><small>Appt Date</small><br><br><u>8 months</u><br><small>Length of Term</small> | ▶ Per Meeting: \$ <u>125.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>          </u><br><small>Other</small> |
| Sanitation District No. 29    | ▶ Name <u>Keir Jones</u><br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small>         | ▶ <u>05 / 01 / 20</u><br><small>Appt Date</small><br><br><u>8 months</u><br><small>Length of Term</small> | ▶ Per Meeting: \$ <u>125.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>          </u><br><small>Other</small> |
| Sanitation District No. 29    | ▶ Name <u>Edward H.J. Wilson</u><br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small> | ▶ <u>05 / 01 / 20</u><br><small>Appt Date</small><br><br><u>8 months</u><br><small>Length of Term</small> | ▶ Per Meeting: \$ <u>125.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>          </u><br><small>Other</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.

\_\_\_\_\_  
Signature of Agency Head or Designee                      Print Name                      Title                      (Month, Day, Year)

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

**Agency Report of:  
Public Official Appointments  
Continuation Sheet**

**1. Agency Name**

City of Signal Hill

Date Posted: 05/01/2020  
(Month, Day, Year)

**2. Appointments**

| Agency Boards and Commissions   | Name of Appointed Person  | Appt Date and Length of Term  | Per Meeting/Annual Salary/Stipend   |
|---|---|---|---|
| Sanitation District No. 29  | ▶ Name <u>Woods, Lori Y.</u><br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i>                       | ▶ <u>05 / 01 / 20</u><br><i>Appt Date</i><br><br><u>8 months</u><br><i>Length of Term</i> | ▶ Per Meeting: \$ <u>125.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i> |
| Sanitation District No. 3   | ▶ Name <u>Hansen, Tina L.</u><br><i>(Last, First)</i><br><br>Alternate, if any <u>Copeland, Robert D.</u><br><i>(Last, First)</i> | ▶ <u>05 / 01 / 20</u><br><i>Appt Date</i><br><br><u>8 months</u><br><i>Length of Term</i> | ▶ Per Meeting: \$ <u>125.00</u><br><br>▶ Estimated Annual:<br><input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i> |
| Gateway Cities Council of Governments   | ▶ Name <u>Wilson, Edward H.J.</u><br><i>(Last, First)</i><br><br>Alternate, if any <u>Jones, Keir</u><br><i>(Last, First)</i>     | ▶ <u>05 / 01 / 20</u><br><i>Appt Date</i><br><br><u>8 months</u><br><i>Length of Term</i> | ▶ Per Meeting: \$ <u>125.00</u><br><br>▶ Estimated Annual:<br><input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i> |
| Southern California Association of Governments Energy & Environmental Committee | ▶ Name <u>Wilson, Edward H.J.</u><br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i>                  | ▶ <u>05 / 01 / 20</u><br><i>Appt Date</i><br><br><u>8 months</u><br><i>Length of Term</i> | ▶ Per Meeting: \$ <u>120.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i> |
| Southern California Association of Governments Energy & Environmental Committee | ▶ Name <u>Copeland, Robert D.</u><br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i>                  | ▶ <u>05 / 01 / 20</u><br><i>Appt Date</i><br><br><u>8 months</u><br><i>Length of Term</i> | ▶ Per Meeting: \$ <u>120.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i>            |
| Southern California Association of Governments Audit Committee                  | ▶ Name <u>Wilson, Edward H.J.</u><br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i>                  | ▶ <u>05 / 01 / 20</u><br><i>Appt Date</i><br><br><u>8 months</u><br><i>Length of Term</i> | ▶ Per Meeting: \$ <u>120.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i> |

**Agency Report of:  
Public Official Appointments  
Continuation Sheet**

**1. Agency Name**

City of Signal Hill

Date Posted: 05/01/2020  
*(Month, Day, Year)*

**2. Appointments**

| Agency Boards and Commissions                                   | Name of Appointed Person   | Appt Date and Length of Term  | Per Meeting/Annual Salary/Stipend   |
|---|--|---|---|
| Southern California Association of Governments General Assembly | ▶ Name <u>Copeland, Robert D.</u><br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i> | ▶ <u>05 / 01 / 20</u><br><i>Appt Date</i><br><br><u>8 months</u><br><i>Length of Term</i> | ▶ Per Meeting: \$ <u>125.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i> |
| California Joint Powers Insurance Authority                     | ▶ Name <u>Jones, Keir</u><br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i>         | ▶ <u>05 / 01 / 20</u><br><i>Appt Date</i><br><br><u>8 months</u><br><i>Length of Term</i> | ▶ Per Meeting: \$ <u>120.00</u><br><br>▶ Estimated Annual:<br><input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i> |
| Vector Control District   | ▶ Name <u>Copeland, Robert D.</u><br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i> | ▶ <u>05 / 01 / 20</u><br><i>Appt Date</i><br><br><u>8 months</u><br><i>Length of Term</i> | ▶ Per Meeting: \$ <u>100.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i> |
|   | ▶ Name _____<br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i>                      | ▶ _____<br><i>Appt Date</i><br><br>_____<br><i>Length of Term</i>                         | ▶ Per Meeting: \$ _____<br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i>                    |
|   | ▶ Name _____<br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i>                      | ▶ _____<br><i>Appt Date</i><br><br>_____<br><i>Length of Term</i>                         | ▶ Per Meeting: \$ _____<br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i>                    |
|   | ▶ Name _____<br><i>(Last, First)</i><br><br>Alternate, if any _____<br><i>(Last, First)</i>                      | ▶ _____<br><i>Appt Date</i><br><br>_____<br><i>Length of Term</i>                         | ▶ Per Meeting: \$ _____<br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____<br><i>Other</i>                    |