## Agency Report of: Public Official Appointments

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1.	Agency Name					California 806		
	City of Anaheim	y of Anaheim				10/111		
	Division, Department, or Reg	on (If Applicable)			For Official Use Only			
	City Council							
	Designated Agency Contact	Name, Title)						
	Theresa Bass, Acting City C	Clerk			D ( D ( )			
	Area Code/Phone Number	a Code/Phone Number   E-mail				Date Posted:		
	714-765-5166 tbass@anaheim.net			Page1 _ of2		12/21/17 (Month, Day, Year)		
2.	Appointments							
	Agency Boards and Name of Appointed Review Appt Date and				Por Mo	eting/Annual Salary/Stipend		
	Commissions	Name of Appointed Person		Length of Term	Fet Wie	eung/Amidal Salary/Superid		
	Orange County Sanitation District	Name Barnes, Denise  (Last, First)  Kring, Lucille  (Last, First)  (Last, First)	<u> 1</u>	2 / 05 / 17 Appt Date  None  Length of Term	▶ Estima  □ \$0-\$1	Per Meeting: \$		
	Orange County Water District, District 9	Vanderbilt, James  Name  (Last, First)  Alternate, if any  (Last, First)		2 / 05 / 17 Appl Date  yrs - 12/2020 Length of Term	▶ Estima  □ \$0-\$1	ted Annual: 1,000		
	Southern California Association of Governments	Murray, Kris  Name  (Last, First)  (Last, First)  Alternate, if any  (Last, First)		2 / 05 / 17 Appl Date 2 yrs - 5/2019 Length of Term	▶ Estima  □ \$0-\$1	ted Annual: 1,000		
	Transportation Corridor Authority - Foothill Eastern	Moreno, Jose F.  (Last, First)  Alternate, if any Kring, Lucille  (Last, First)	<u>, 1</u>	2 / 05 / 17 Appl Date  None Length of Term	▶ Estima  □ \$0-\$1	ted Annual: 1,000		
·. 	Verification  I have read and/anderstand FPPC Regulation  Signature of Agency Flead or Designed  Comment:	Theresa Bass  Print Nume	rmation	identified above is tru Acting City C		st of my information and belief.  12/21/2017  (Month, Dey, Year)		

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



				Page $\frac{2}{}$ of $\frac{2}{}$				
1.	Agency Name City of Anaheim	Date Posted: 12/21/17 (Month, Day, Year)						
2.	Appointments							
	Agency Boards and Name of Appointed Person Appt Da Length of		Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend				
	Orange County Vector Control District	Name Kring, Lucille  (Last, First)  Alternate, if any(Last, First)	12 / 05 / 17  Appl Date  4 yrs - 12/2021  Length of Term	▶ Per Meeting:       \$				
		Name(Last, First)  Alternate, if any(Last, First)	Appt Date  Length of Term	▶ Per Meeting:       \$				
		▶Name(Last, First)  Alternate, if any(Last, First)	Appt Date  Length of Term	▶ Per Meeting: \$				
		Name(Last, First)  Alternate, if any(Last, First)	Appl Date  Length of Term	▶ Per Meeting: \$				
		Name(Last, First)  Alternate, if any(Last, First)	Appt Date  Length of Term	▶ Per Meeting: \$				
		Name(Last, First)  Alternate, if any(Last, First)	Appt Date  Length of Term	▶ Per Meeting:       \$				