

**Agency Report of:
Public Official Appointments**

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CITY OF PICO RIVERA
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A Public Document

1. Agency Name City of Pico Rivera		California Form 806 For Official Use Only
Division, Department, or Region (If Applicable) Office of the City Clerk		
Designated Agency Contact (Name, Title) Cynthia Ayala		
Area Code/Phone Number (562) 801-4390	E-mail cayala@pico-rivera.org	Date Posted: 1/24/2024 <small>(Month, Day, Year)</small>
Page 1 of 2		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Gateway Cities Council of Governments	▶ Name <u>Lutz, Erik</u> <small>(Last, First)</small> Alternate, if any <u>Sanchez, Monica</u> <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Sanitation District of Los Angeles	▶ Name <u>Lara, Andrew C.</u> <small>(Last, First)</small> Alternate, if any <u>Camacho, Gustavo V.</u> <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>125.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Southeast Area Animal Control Authority	▶ Name <u>Camacho, Gustavo V.</u> <small>(Last, First)</small> Alternate, if any <u>Lutz, Erik</u> <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>225.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Greater Los Angeles County Vector Control	▶ Name <u>Camacho, Gustavo V.</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>2 years</u> <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"/> Other

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.


Steve Carmona
City Manager
1/24/2024
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____

Print **Clear**

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

1. Agency Name City of Pico Rivera	Date Posted: <u>1/24/2024</u> <small>(Month, Day, Year)</small>
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Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Southeast Water Coalition	▶ Name <u>Lara, Andrew C.</u> <small>(Last, First)</small> Alternate, if any <u>Garcia, John R.</u> <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <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"/> Other
Housing Assistance Agency	▶ Name <u>Camacho, Gustavo V.</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>30.00</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"/> Other
Housing Assistance Agency	▶ Name <u>Garcia, John R.</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>30.00</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"/> Other
Housing Assistance Agency	▶ Name <u>Lara, Andrew C.</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>30.00</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"/> Other
Housing Assistance Agency	▶ Name <u>Lutz, Erik</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>30.00</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"/> Other
Housing Assistance Agency	▶ Name <u>Sanchez, Monica</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1/23/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>30.00</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"/> Other