

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name City of Gardena			California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)			
Elected Offices			
Designated Agency Contact (Name, Title) Alejandra Orozco, Executive Assistant			
Area Code/Phone Number 310-217-9504	E-mail aorozco@cityofgardena.org	Page 1 of 1	Date Posted: 7-14-2022 <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
County of Los Angeles Sanitation District No. 5	▶ Name <u>Cerda, Tasha</u> <small>(Last, First)</small> Alternate, if any <u>Henderson, Mark</u> <small>(Last, First)</small>	▶ <u>04 / 11 / 17</u> <small>Appt Date</small> ▶ <u>7/26/2022</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>125.00</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
California Cities Gaming Authority	▶ Name <u>Cerda, Tasha</u> <small>(Last, First)</small> Alternate, if any <u>Tanaka, Rodney</u> <small>(Last, First)</small>	▶ <u>11 / 13 / 19</u> <small>Appt Date</small> ▶ <u>7/26/2022</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</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
Greater Los Angeles Vector Control District	▶ Name <u>Francis, Paulette</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>11 / 16 / 2024</u> <small>Appt Date</small> ▶ <u>7/26/2022</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
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ ____ / ____ / ____ <small>Appt Date</small> ▶ _____ <small>Length of Term</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"/> 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.

<u>B. Romero</u>	Becky Romero	Deputy City Clerk	7-14-2022
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

Comment: _____

Print
Clear