

**Agency Report of:
Public Official Appointments**

A Public Document

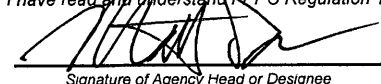
1. Agency Name City of Grover Beach <i>Division, Department, or Region (If Applicable)</i>		California Form 806 <small>For Official Use Only</small>	
Designated Agency Contact (Name, Title) Wendi B. Sims, City Clerk			
Area Code/Phone Number (805) 473-4567	E-mail wsims@groverbeach.org		
			Date Posted: 1/24/2023 <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
Air Pollution Control District (APCD)	▶ Name <u>Karen Bright</u> <small>(Last, First)</small> Alternate, if any <u>Anna Miller</u> <small>(Last, First)</small>	▶ <u>1 / 23 / 23</u> <small>Appt Date</small> ▶ *until recinded <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"/> <u> </u> Other
Integrated Waste Management Authority (IWMA)	▶ Name <u>Robert Robert</u> <small>(Last, First)</small> Alternate, if any <u>Daniel Rushing</u> <small>(Last, First)</small>	▶ <u>1 / 23 / 23</u> <small>Appt Date</small> ▶ *until recinded <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"/> <u> </u> Other
San Luis Obispo Council of Governments (SLOCOG)	▶ Name <u>Daniel Rushing</u> <small>(Last, First)</small> Alternate, if any <u>Karen Bright</u> <small>(Last, First)</small>	▶ <u>1 / 23 / 23</u> <small>Appt Date</small> ▶ *until recinded <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"/> <u> </u> Other
South San Luis Obispo County Sanitation District (SSLOCSD)	▶ Name <u>Karen Bright</u> <small>(Last, First)</small> Alternate, if any <u>Clint Weirick</u> <small>(Last, First)</small>	▶ <u>1 / 23 / 23</u> <small>Appt Date</small> ▶ *until recinded <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"/> <u> </u> Other

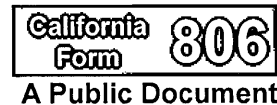
3. Verification

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

 <small>Signature of Agency Head or Designee</small>	<u>Matthew Bronson</u> <small>Print Name</small>	<u>City Manager</u> <small>Title</small>	<u>1/24/2023</u> <small>(Month, Day, Year)</small>
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Comment *annual appts by Resolution, **CJPIA appts - Mayor/Alternates - 1-City Manager; 2-Admin Svs Dir.; 3-HR

Agency Report of:
 Public Official Appointments
 Continuation Sheet
 City of Grover Beach



1. Agency Name _____ **Date Posted:** 1/24/2023
 (Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
California Joint Powers Insurance Authority (CJPIA)	▶ Name <u>Karen Bright</u> <small>(Last, First)</small> Alternate, if any <u>Matthew Bronson</u> <small>(Last, First)</small>	▶ <u>1 / 23 / 23</u> <small>Appt Date</small> ▶ <u>**per agrmt</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"/> <u> </u> <small>Other</small>
	▶ 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"/> _____ <small>Other</small>
	▶ 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"/> _____ <small>Other</small>
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