

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name City of Lafayette		<div style="border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">FEB 14 2024</div> <div style="border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">CITY OF LAFAYETTE</div>	<div style="border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">California Form 806</div> <div style="font-size: 0.8em;">For Official Use Only</div>
Division, Department, or Region (If Applicable)			Date Posted: Feb. 14, 2024 <small>(Month, Day, Year)</small>
Designated Agency Contact (Name, Title) Joanne Robbins			
Area Code/Phone Number 925-284-1968	E-mail jrobbins@ci.lafayette.ca.us	Page 1 of 1	

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
CCC Solid Waste Authority	▶ Name <u>Gina Dawson</u> <small>(Last, First)</small> Alternate, if any <u>John McCormick</u> <small>(Last, First)</small>	▶ <u>2/12/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>50</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
CCTA	▶ Name <u>Susan Candell</u> <small>(Last, First)</small> Alternate, if any <u>Wei-Tai Kwok</u> <small>(Last, First)</small>	▶ <u>2/12/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</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
CCCTA	▶ Name <u>Don Tatzin</u> <small>(Last, First)</small> Alternate, if any <u>Susan Candell</u> <small>(Last, First)</small>	▶ <u>2/12/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</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
	▶ 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.

Niroop K. Srivatsa
Niroop K. Srivatsa
City Manager
02/14/2024

Print Name
Title
(Month, Day, Year)

Comment: _____

Print
Clear