

**Agency Report of:  
Public Official Appointments**

**A Public Document**

|  |                                  |   |  |
|--|----------------------------------|---|--|
| <b>1. Agency Name</b><br>City of Burbank                               |                                  | <b>California Form 806</b><br>For Official Use Only |  |
| Division, Department, or Region (If Applicable)                        |                                  |   |  |
| Designated Agency Contact (Name, Title)<br>Zizette Mullins, City Clerk |                                  |   |  |
| Area Code/Phone Number<br>818-238-5851                                 | E-mail<br>zmullins@burbankca.gov | Page <u>1</u> of <u>1</u>                           | Date Posted:<br><u>5/2/13</u><br><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   |
|---|---|--|---|
| San Fernando Valley Service Sector Governance Council (METRO) | ▶ Name <u>Bric, Gary</u><br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small> | ▶ <u>7 / 1 / 12</u><br><small>Appt Date</small><br><br>▶ <u>3 Years</u><br><small>Length of Term</small> | ▶ Per Meeting: \$ <u>100.00</u><br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>          </u> Other |
|   | ▶ Name _____<br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small>             | ▶ _____<br><small>Appt Date</small><br><br>▶ _____<br><small>Length of Term</small>                      | ▶ Per Meeting: \$ _____<br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>          </u> Other                    |
|   | ▶ Name _____<br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small>             | ▶ _____<br><small>Appt Date</small><br><br>▶ _____<br><small>Length of Term</small>                      | ▶ Per Meeting: \$ _____<br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>          </u> Other                    |
|   | ▶ Name _____<br><small>(Last, First)</small><br><br>Alternate, if any _____<br><small>(Last, First)</small>             | ▶ _____<br><small>Appt Date</small><br><br>▶ _____<br><small>Length of Term</small>                      | ▶ Per Meeting: \$ _____<br><br>▶ Estimated Annual:<br><input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000<br><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>          </u> Other                    |

**3. Verification**

*I have read and understand FPPC Regulation 18705.5. I have verified that the appointment and information identified above is true to the best of my information and belief.*

|   |                           |                      |                                   |
|---|---------------------------|----------------------|-----------------------------------|
|  | Zizette Mullins           | City Clerk           | 5/2/13                            |
| <small>Signature of Agency Head or Designee</small>                                 | <small>Print Name</small> | <small>Title</small> | <small>(Month, Day, Year)</small> |

Comment: \_\_\_\_\_