

State Controller's Office - Local Government Programs and Services Division
Special Districts - Government Compensation Report - Calendar Year 2019

Preparer Contact Information

Preparer Name Chris Montana
 Phone Number (714) 840-7077
 E-mail Address blueskyhb@aol.com

Entity Name Orange - Sunset Beach Sanitary District (Orange)
 www.sunsetbeachsd.org
 'Save As' Filename 2019-12303008500.xlsx

Human Resources Web Page
 Employees Hold more than One Position?
 Do the amounts in the Defined Benefit Plan column include payment toward the pension unfunded liability?

No (Enter 'Yes' or 'No')
 No (Enter 'Yes' or 'No')

Line #	Elected Position Enter 'Y'	Department	Classification	Multiple Positions Footnote	Annual Salary		Annual Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Retirement Plan:		Deferred Compensation / Defined Contribution Plan	Health, Dental, Vision
					Minimum	Maximum						Employees' Share Paid by Employer	Defined Benefit Plan: Employer's Share		
1.	Y	Board of Directors	President		0	2,945	2,945	0	0	0	0	0	0	0	0
2.	Y	Board of Directors	Secretary		0	2,100	2,100	0	0	0	0	0	0	0	0
3.	Y	Board of Directors	Treasurer		0	1,100	1,100	0	0	0	0	0	0	0	0
4.	Y	Board of Directors	Director		0	1,000	1,000	0	0	0	0	0	0	0	0
5.	Y	Board of Directors	Director		0	700	700	0	0	0	0	0	0	0	0
6.		Staff	Superintendent		70,956	77,449	77,449	0	0	0	0	0	0	0	0
7.		Staff	Superintendent II		26,552	29,665	29,665	0	0	0	0	0	0	0	0
8.		Staff	Asst Superintendent		9,182	15,571	15,571	0	0	0	0	0	0	0	0
9.		Staff	Asst Superintendent		4,201	5,551	5,551	0	0	0	0	0	0	0	0
10.		Staff	Asst Superintendent		5,600	11,660	11,660	0	0	0	0	0	0	0	0

--- Total Wages Subject to Medicare (Box 5 of W-2): ---

----- Employer Contribution: -----