## State Controller's Office - Local Government Programs and Services Division

Special Districts - Government Compensation Report - Calendar Year 2020

Refer to the 2020 GCC Reporting Instructions for more details

Entity Name Los Angeles - Compton Creek Mosquito Abatement District

Human Resources Web Page info@comptoncreekmad.org

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')

## Preparer Contact Information

Preparer Name Mitchel R. Weinbaum
Phone Number 310 933-5321

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

E-mail Address info@comptoncreekmad.org

		Total Wages Subject to Medicare (Box 5 of W-2)						5 of W-2):		Retirement		Deferred			
							١	•		ŕ	Applicable	Plan:	Defined Benefi	t Compensation	
	Elected			Multiple	Annual	Annual					<b>Defined Benefit</b>	<b>Employees'</b>	Plan:	/Defined	Health,
	Position			Positions	Salary	Salary	Annual	Overtime	Lump Sum		Pension	Share Paid by	Employer's	Contribution	Dental,
Line #	Enter 'Y'	Department	Classification	Footnote	Minimum	Maximum	Regular Pay	Pay	Pay	Other Pay	Formula	Employer	Share	Plan	Vision
1.	No	Administration	District Manager		115,500	115,500	115,000				2%60	O		8 N/A	N/A
2.	No	Operations	Seasonal Technician		22,352	22,352	22,352				N/A	N/A	N/A	N/A	N/A
3.	No	Board Menber	Trustee		1,200	1,200	1,200				N/a	N/A	N/A	N/A	N/A
4.	No	<b>Board Menmber</b>	Trustee		1,200	1,200	1,200				N/A	N/A	N/A	N/A	N/A
5.	No	Board Member	Trustee		1,200	1,200	1,200				N/A	N/A	N/A	N/A	N/A
6.	No	Board Member	Trustee		1,200	1,200	1,200				N/A	N/A	N/A	N/A	N/A
7.	No	Board Member	Trustee		1,200	1,200	1,200				N/A	N/A	N/A	N/A	N/A

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