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

Special Districts - Government Compensation Report - Calendar Year 2022

Refer to the 2022 GCC Reporting Instructions for more details

<u>kelel to t</u>	116 ZUZZ G	ce Reporting motructions i	or more details	
Entity Name	Orange - S	Surfside Colony Commur	nity Services District	
Human Resources Web Page	www.surf	sidecolonycsd.org		
Employees Hold more than One Position?		(Enter 'Yes' or 'No')	'Save As' Filename	2022-12053005000.xlsx
Do the amounts in the Defined Benefit Plan column include payment				
toward the pension unfunded liability?	No	(Enter 'Yes' or 'No')		

Preparer Contact Information

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

	(Little 1 is 5. No)							" Employer Contribution:"								
				Total Wages Subject to Medicare (Box 5 of W-2):			Applicable	Retirement Plan:	Defined Benefit	•						
		Elected Position			Multiple Positions	Annual Salary	Annual Salary	Annual		Lump Sum		Defined Benefit Pension	Employees' Share Paid by	Plan: Employer's	/Defined Contribution	Health, Dental,
Line #		Enter 'Y'	Department	Classification	Footnote	Minimum	Maximum	Regular Pay	Overtime Pay	Pay	Other Pay	Formula	Employer	Share	Plan	Vision
	1.	Υ	Board	Director		0	0	C	0	0	0	0	0	0	0	0
	2.	Υ	Board	Director		0	0	C	0	0	0	0	0	0	0	0
	3.	Υ	Board	Director		0	0	C	0	0	0	0	0	0	0	0
	4.	Υ	Board	Director		0	0	0	0	0	0	0	0	0	0	0
	5.	Υ	Board	Director		0	0	0	0	0	0	0	0	0	0	0