



**LOCAL AGENCY FORMATION COMMISSION**  
1190 Suncastr Ln, Suite 11. El Dorado Hills, CA 95762  
(530) 295-2707 · lafco@edlafco.us · www.edlafco.us

---

## **DISCLOSURE OF GIFTS, CONTRIBUTIONS AND HONORARIA**

Government Code Section § 84308

The following is a list of commissioners currently serving on LAFCO. If you have contributed \$250.00 or more to any one commissioner, please complete the Party Disclosure Form declaring such contributions. If you, together with your business partners, spouses, or other members of your immediate family, have combined contributions totaling \$250.00 or more, that contribution must be declared. The time period for contributions which must be declared is the 12 calendar months preceding the LAFCO action on your project (§ 84308).

### **COMMISSIONER**

Nicole Gotberg  
John Hidahl  
George Turnboo  
Tamara Wallace  
Brian Veerkamp  
Timothy J. White  
Bill Wilde

### **AFFILIATION**

City of Placerville City Council  
El Dorado County Board of Supervisors  
El Dorado County Board of Supervisors  
City of South Lake Tahoe City Council  
El Dorado Irrigation District  
El Dorado Hills Water District  
Public Member

### **ALTERNATE COMMISSIONERS**

John Clerici  
Michael Saunders  
Wendy Thomas  
Dawn Hodson

### **AFFILIATION**

City of Placerville City Council  
Georgetown Divide Public Utilities District  
El Dorado County Board of Supervisors  
Alternate Public Member

If you have any questions or need additional forms, please call LAFCO staff at your convenience.





**LOCAL AGENCY FORMATION COMMISSION**  
1190 Suncoast Ln, Suite 11. El Dorado Hills, CA 95762  
(530) 295-2707 · lafco@edlafco.us · www.edlafco.us

---

**DISCLOSURE OF GIFTS, CONTRIBUTIONS AND HONORARIA**

Government Code Section § 84308

**LAFCO Project Name:** \_\_\_\_\_

**Applicant/Agent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Name of Commissioner or Alternate: \_\_\_\_\_

Name of Contributor: \_\_\_\_\_

Name of Commissioner or Alternate: \_\_\_\_\_

Name of Contributor: \_\_\_\_\_

Name of Commissioner or Alternate: \_\_\_\_\_

Name of Contributor: \_\_\_\_\_

Name of Commissioner or Alternate: \_\_\_\_\_

Name of Contributor: \_\_\_\_\_

Name of Commissioner or Alternate: \_\_\_\_\_

Name of Contributor: \_\_\_\_\_

Attach additional sheets, if needed.