

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

**Special Districts - Government Compensation Report - Calendar Year 2019**

**Preparer Contact Information**

[Refer to the 2019 GCC Reporting Instructions for more details](#)

Entity Name	San Diego - California Municipal Finance Authority		
Human Resources Web Page	N/A		
Employees Hold more than One Position?	No	(Enter 'Yes' or 'No')	'Save As' Filename 2019-12503701500.xlsx
Do the amounts in the Defined Benefit Plan column include payment toward the pension unfunded liability?	No	(Enter 'Yes' or 'No')	

Preparer Name	Lee A. McCormick
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"----- Employer Contribution: -----"

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

Line #	Elected Position Enter 'Y'	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Annual		Lump Sum		Applicable Defined Benefit Pension Formula	Retirement			Health, Dental, Vision
							Regular Pay	Overtime Pay	Pay	Other Pay		Plan: Employees' Share Paid by Employer	Defined Benefit Plan: Employer's Share	Deferred Compensation /Defined Contribution Plan	
1.		Board Member	Director		0	0	0	0	0	0	N/A	0	0	0	0
2.		Board Member	Director		0	0	0	0	0	0	N/A	0	0	0	0
3.		Board Member	Director		0	0	0	0	0	0	N/A	0	0	0	0
4.		Board Member	Director		0	0	0	0	0	0	N/A	0	0	0	0
5.		Board Member	Director		0	0	0	0	0	0	N/A	0	0	0	0
6.		Board Member	Alternate		0	0	0	0	0	0	N/A	0	0	0	0
7.		Board Member	Alternate		0	0	0	0	0	0	N/A	0	0	0	0