

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name CITY OF MISSIONVIEJO		California Form 806	For Official Use Only
Division, Department, or Region (If Applicable) CITY CLERK			
Designated Agency Contact (Name, Title) KIMBERLY SCHMITT, CITY CLERK			
Area Code/Phone Number 949270-3052	E-mail CITYCLERK@CITYOFMISSIONVIEJO.ORG	Page <u>1</u> of <u>1</u>	Date Posted: January 11, 2024 <small>(Month, Day, Year)</small>

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Orange County Fire Authority	▶ Name <u>Robert Ruesch</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>1/9/2024</u> <small>Appt Date</small> ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Orange County Vector Control	▶ Name <u>Robert Ruesch</u> <small>(Last, First)</small> Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>12/12/2023</u> <small>Appt Date</small> ▶ <u>2 years</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</u> ▶ Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Transportation Corridor Agency	▶ Name <u>Trish Kelley</u> <small>(Last, First)</small> Alternate, if any <u>Brian Goodell</u> <small>(Last, First)</small>	▶ <u>1/09/2024</u> <small>Appt Date</small> ▶ <u>1</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>120.00</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ _____ <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ _____ ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other

3. Verification

I have read and understand FPPC Regulation 18702.5. I have verified that the appointment and information identified above is true to the best of my information and belief.

Kimberly Schmitt
City Clerk
01/11/2024
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____

Print

Clear