

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name

City of Mission Viejo

Division, Department, or Region (If Applicable)

N/A

Designated Agency Contact (Name, Title)

Karen Hamman, City Clerk

Area Code/Phone Number

949) 470-3033

E-mail

khamman@cityofmissionviejo.org

California Form **806**

For Official Use Only

Date Posted:

January 14, 2015

(Month, Day, Year)

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2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Transportation Corridor Agency	<p>▶ Name <u>Raths, Greg</u> <small>(Last, First)</small></p> <p>Alternate, if any <u>Sachs, Ed</u> <small>(Last, First)</small></p>	<p>▶ <u>01 / 13 / 15</u> <small>Appl Date</small></p> <p>▶ <u>1 year</u> <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ <u>120.00</u></p> <p>▶ 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</p>
Orange County Fire Authority	<p>▶ Name <u>Sachs, Ed</u> <small>(Last, First)</small></p> <p>Alternate, if any <u>Schlicht, Cathy</u> <small>(Last, First)</small></p>	<p>▶ <u>01 / 13 / 15</u> <small>Appl Date</small></p> <p>▶ <u>1 year</u> <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ <u>100.00</u></p> <p>▶ 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</p>
	<p>▶ Name _____ <small>(Last, First)</small></p> <p>Alternate, if any _____ <small>(Last, First)</small></p>	<p>▶ <u> / / </u> <small>Appl Date</small></p> <p>▶ _____ <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ _____</p> <p>▶ 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</p>
	<p>▶ Name _____ <small>(Last, First)</small></p> <p>Alternate, if any _____ <small>(Last, First)</small></p>	<p>▶ <u> / / </u> <small>Appl Date</small></p> <p>▶ _____ <small>Length of Term</small></p>	<p>▶ Per Meeting: \$ _____</p> <p>▶ 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</p>

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.

Karen Hamman
Signature of Agency Head or Designee

Karen Hamman
Print Name

City Clerk
Title

1/14/15
(Month, Day, Year)

Comment: _____