

**Agency Report of:
Public Official Appointments**

A Public Document


1. Agency Name City of Laguna Hills		Page <u>1</u> of <u>1</u>	California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)			Date Posted: <u>1/15/2020</u> <small>(Month, Day, Year)</small>
Designated Agency Contact (Name, Title) Melissa Au-Yeung, Deputy City Manager			
Area Code/Phone Number 949-707-2621	E-mail mau-yeung@lagunahillsca.gov		

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>Sedgwick, Don</u> <small>(Last, First)</small> Alternate, if any <u>None</u> <small>(Last, First)</small>	▶ <u>01 / 13 / 15</u> <small>Appt Date</small> <u>undefined</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100-330 max.</u> ▶ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>\$3,600</u> <small>Other</small>
Transportation Corridor Agency (San Joaquin Hills Transportation Corridor Agency)	▶ Name <u>Heft, Janine</u> <small>(Last, First)</small> Alternate, if any <u>Pezold, Erica</u> <small>(Last, First)</small>	▶ <u>03 / 01 / 18</u> <small>Appt Date</small> <u>undefined</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>120</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"/> <u> </u> <small>Other</small>
Orange County Mosquito and Vector Control District	▶ Name <u>Pezold, Erica</u> <small>(Last, First)</small> Alternate, if any <u>None</u> <small>(Last, First)</small>	▶ <u>01 / 14 / 20</u> <small>Appt Date</small> <u>2 years</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</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"/> <u> </u> <small>Other</small>
	▶ Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u> / / </u> <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"/> _____ <small>Other</small>

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.

	Donald J. White	City Manager	1/15/2020
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: _____