

**Agency Report of:
Public Official Appointments**

A Public Document

1. Agency Name County of Orange Division, Department, or Region (If Applicable) Board of Supervisors Designated Agency Contact (Name, Title) Robin Stieler, Clerk of the Board		California Form 806 For Official Use Only	Date Posted: 9/10/2024 (Month, Day, Year)
Area Code/Phone Number (714) 834-2206	E-mail Robin.Stieler@ocgov.com		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
First 5 Orange County (Children & Families Commission)	▶ Name <u>Chaffee, Doug</u> <small>(Last, First)</small> Alternate, if any <u>Foley, Katrina</u> <small>(Last, First)</small>	▶ 1 / 23 / 24 <small>Appt Date</small> ▶ 1 Year <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
Local Agency Formation Commission (LAFCO)	▶ Name <u>Wagner, Donald</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ 1 / 23 / 24 <small>Appt Date</small> ▶ 4 Years <small>Length of Term</small>	▶ Per Meeting: \$ <u>100.00</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
Local Agency Formation Commission (LAFCO)	▶ Name <u>Vacant</u> <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
Orange County Behavioral Health Advisory Board	▶ Name <u>Sarmiento, Vicente</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ 1 / 23 / 24 <small>Appt Date</small> ▶ 1 Year <small>Length of Term</small>	▶ Per Meeting: \$ <u>20.00</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

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.

Robin Stieler
Signature of Agency Head or Designee

Robin Stieler
Print Name

Clerk of the Board
Title

9/10/2024
(Month, Day, Year)

Comment: _____

Print **Clear**

**Agency Report of:
Public Official Appointments
Continuation Sheet**

1. Agency Name County of Orange	Date Posted: <u>9/10/2024</u> <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>Wagner, Donald</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1</u> / <u>23</u> / <u>24</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 type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>\$3,600</u> <small>Other</small>
Orange County Fire Authority	▶ Name <u>Foley, Katrina</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1</u> / <u>23</u> / <u>24</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 type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>3,600</u> <small>Other</small>
Orange County Sanitation District	▶ Name <u>Chaffee, Doug</u> <small>(Last, First)</small> Alternate, if any <u>Wagner, Donald</u> <small>(Last, First)</small>	▶ <u>1</u> / <u>23</u> / <u>24</u> <small>Appt Date</small> ▶ <u>1 Year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>212.50</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>\$5,100</u> <small>Other</small>
Orange County Transportation Authority	▶ Name <u>Vacant</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ _____ / _____ / _____ <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 checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small>
Orange County Transportation Authority	▶ Name <u>Sarmiento, Vicente</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1</u> / <u>23</u> / <u>24</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 checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small>
Orange County Transportation Authority	▶ Name <u>Wagner, Donald</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1</u> / <u>23</u> / <u>24</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 checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small>

Print

Clear

**Agency Report of:
Public Official Appointments
Continuation Sheet**

1. Agency Name County of Orange	Date Posted: <u>9/10/2024</u> <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 Transportation Authority	▶ Name <u>Chaffee, Doug</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1 / 23 / 24</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 checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small>
Orange County Transportation Authority	▶ Name <u>Foley, Katrina</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1 / 23 / 24</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 checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small>
South Coast Air Quality Management District	▶ Name <u>Wagner, Donald</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>9 / 10 / 24</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 checked="" type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ <small>Other</small>
Southern California Association of Governments	▶ Name <u>Wagner, Donald</u> <small>(Last, First)</small> Alternate, if any <u>Foley, Katrina</u> <small>(Last, First)</small>	▶ <u>1 / 23 / 24</u> <small>Appt Date</small> <u>1 Year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</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"/> _____ <small>Other</small>
Transportation Corridor Agency - Foothill/Eastern	▶ Name <u>Wagner, Donald</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1 / 23 / 24</u> <small>Appt Date</small> <u>1 Year</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"/> _____ <small>Other</small>
Transportation Corridor Agency - Foothill/Eastern	▶ Name <u>Chaffee, Doug</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1 / 23 / 24</u> <small>Appt Date</small> <u>1 Year</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"/> _____ <small>Other</small>

**Agency Report of:
Public Official Appointments
Continuation Sheet**

1. Agency Name County of Orange	Date Posted: <u>9/10/2024</u> <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
Transportation Corridor Agency - Foothill/Eastern	▶ Name <u>Foley, Katrina</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1</u> / <u>23</u> / <u>24</u> <small>Appt Date</small> <u>1 Year</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"/> _____ <small>Other</small>
Transportation Corridor Agency - San Joaquin Hills	▶ Name <u>Wagner, Donald</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1</u> / <u>23</u> / <u>24</u> <small>Appt Date</small> <u>1 Year</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"/> _____ <small>Other</small>
Transportation Corridor Agency - San Joaquin Hills	▶ Name <u>Foley, Katrina</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>1</u> / <u>23</u> / <u>24</u> <small>Appt Date</small> <u>1 Year</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"/> _____ <small>Other</small>
	▶ 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"/> _____ <small>Other</small>
	▶ 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"/> _____ <small>Other</small>
	▶ 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"/> _____ <small>Other</small>

Print

Clear