

**Agency Report of:  
Public Official Appointments**

**A Public Document**

<b>1. Agency Name</b> City of Aliso Viejo			<b>California Form 806</b> For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Mitzi Ortiz, City Clerk		Page <u>1</u> of <u>1</u>	Date Posted: <b>January 23, 2015</b> <small>(Month, Day, Year)</small>
Area Code/Phone Number (949) 425-2505	E-mail city-clerk@cityofaliso Viejo.com		

**2. Appointments**

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Transportation Corridor Agency (TCA)	▶ Name <u>Chun, Ross</u> <small>(Last, First)</small>  Alternate, if any <u>Harrington, David</u> <small>(Last, First)</small>	▶ <u>01 / 07 / 15</u> <small>Appt Date</small>  ▶ <u>1 year</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 type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>\$8,640</u> <small>Other</small>
Orange County Fire Authority (OCFA)	▶ Name <u>Tsunoda, Phillip</u> <small>(Last, First)</small>  Alternate, if any <u>Harrington, David</u> <small>(Last, First)</small>	▶ <u>01 / 07 / 15</u> <small>Appt Date</small>  ▶ <u>1 year</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>100</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"/> <u>          </u> <small>Other</small>
Orange County Vector Control District (OCVCD)	▶ Name <u>Tsunoda, Phillip</u> <small>(Last, First)</small>  Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 07 / 15</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>
Southern California Association of Governments (SCAG)	▶ Name <u>Munzing, Mike</u> <small>(Last, First)</small>  Alternate, if any <u>N/A</u> <small>(Last, First)</small>	▶ <u>01 / 07 / 15</u> <small>Appt Date</small>  ▶ <u>1 year</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>

**3. Verification**

I have read and understand FPPC Regulation 18705.5. I have verified that the appointment and information identified above is true to the best of my information and belief.

David A. Doyle
City Manager
01/23/2015

Signature of Agency Head or Designee      Print Name      Title      (Month, Day, Year)

Comment: \_\_\_\_\_