

**Agency Report of:
Public Official Appointments**

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1. Agency Name City of Irvine		2021 JAN 14 PM 3:08	California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Carl Petersen, Interim City Clerk		Page 1 of 2	Date Posted: January 14, 2021 <small>(Month, Day, Year)</small>
Area Code/Phone Number 949-724-6205	E-mail cpetersen@cityofirvine.org		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
HOUSING AND COMMUNITY DEVELOPMENT COMMISSION - ORANGE COUNTY	▶ Name <u>KIM, TAMMY</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 12 / 21</u> <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ <u>50.00</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"/> _____ <small>Other</small>
ORANGE COUNTY FIRE AUTHORITY	▶ Name <u>KUO, ANTHONY</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 12 / 21</u> <small>Appt Date</small> ▶ _____ <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"/> _____ <small>Other</small>
ORANGE COUNTY SANITATION DISTRICT	▶ Name <u>KUO, ANTHONY</u> <small>(Last, First)</small> Alternate, if any <u>KHAN, FARRAH N.</u> <small>(Last, First)</small>	▶ <u>01 / 12 / 21</u> <small>Appt Date</small> ▶ _____ <small>Length of Term</small>	▶ Per Meeting: \$ <u>212.50</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"/> _____ <small>Other</small>
ORANGE COUNTY MOSQUITO AND VECTOR CONTROL DISTRICT	▶ Name <u>KIM, TAMMY</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 12 / 21</u> <small>Appt Date</small> ▶ _____ <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"/> _____ <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.

 MARIANNA MARYSHEVA INTERIM CITY MANAGER 1/14/2021
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____

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

1. Agency Name
City of Irvine
Date Posted: January 14, 2021
(Month, Day, Year)

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
SOUTHERN CALIFORNIA ASSOCIATION OF GOVERNMENTS REGIONAL COUNCIL (District 14)	▶ Name <u>CARROLL, MIKE</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>01 / 12 / 21</u> Appt Date ▶ _____ Length of Term	▶ Per Meeting: \$ <u>120.00</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
TRANSPORTATION CORRIDOR AGENCY - Foothill/Eastern	▶ Name <u>KHAN, FARRAH N.</u> (Last, First) Alternate, if any <u>KUO, ANTHONY</u> (Last, First)	▶ <u>01 / 12 / 21</u> Appt Date ▶ _____ Length of Term	▶ Per Meeting: \$ <u>120.00</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
TRANSPORTATION CORRIDOR AGENCY - San Joaquin Hills	▶ Name <u>KHAN, FARRAH N.</u> (Last, First) Alternate, if any <u>KUO, ANTHONY</u> (Last, First)	▶ <u>01 / 12 / 21</u> Appt Date ▶ _____ Length of Term	▶ Per Meeting: \$ <u>120.00</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
	▶ Name _____ (Last, First) Alternate, if any _____ (Last, First)	▶ ____ / ____ / ____ Appt Date ▶ _____ Length of Term	▶ 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
	▶ Name _____ (Last, First) Alternate, if any _____ (Last, First)	▶ ____ / ____ / ____ Appt Date ▶ _____ Length of Term	▶ 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
	▶ Name _____ (Last, First) Alternate, if any _____ (Last, First)	▶ ____ / ____ / ____ Appt Date ▶ _____ Length of Term	▶ 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