

Agency Report of: Public Official Appointments

A Public Document


1. Agency Name City of Laguna Niguel			California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Marissa J. Asistin, City Clerk			
Area Code/Phone Number (949)362-4301	E-mail cityclerk@cityoflagunaniguel.org	Page 1 of 1	Date Posted: 12/18/2024 (Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
California Joint Powers Insurance Authority (CJPIA)	▶ Name <u>Gennawey, Ray</u> (Last, First) Alternate, if any <u>Jennings, Kelly</u> (Last, First)	▶ <u>12/17/2024</u> Appt Date ▶ <u>Until Replaced</u> Length of Term	▶ 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
Orange County Fire Authority (OCFA)	▶ Name <u>Jennings, Kelly</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>12/17/2024</u> Appt Date ▶ <u>Until Replaced</u> Length of Term	▶ 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"/> Other
San Joaquin Hills Transportation Corridor Agencies (TCA)	▶ Name <u>Oddo, Stephanie</u> (Last, First) Alternate, if any <u>Jennings, Kelly</u> (Last, First)	▶ <u>12/17/2024</u> Appt Date ▶ <u>Until Replaced</u> 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
Orange County Mosquito and Vector Control District (OCMVCD)	▶ Name <u>Johns, Foster Gene</u> (Last, First) Alternate, if any _____ (Last, First)	▶ <u>12/17/2024</u> Appt Date ▶ <u>Until Replaced</u> Length of Term	▶ 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"/> 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.

 Signature of Agency Head or Designee	<u>Marissa J. Asistin</u> Print Name	<u>City Clerk</u> Title	<u>12/18/2024</u> (Month, Day, Year)
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Comment: _____

Print

Clear

FPPC Form 806 (1/18)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)