

**Agency Report of:
Public Official Appointments**

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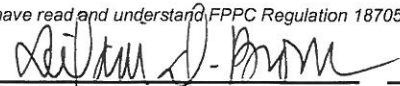
1. Agency Name CITY OF NEWPORT BEACH		2012 JUN 15 PM 2: OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH	California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Leilani I. Brown, City Clerk			
Area Code/Phone Number 949-644-3005	E-mail lbrown@newportbeachca.gov	Page <u>1</u> of <u>1</u>	Date Posted: 06/15/2012 <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
Southern California Association of Governments (SCAG)	▶ Name <u>Daigle, Leslie</u> <small>(Last, First)</small> Alternate, if any <u>Selich, Ed</u> <small>(Last, First)</small>	▶ <u>01 / 10 / 12</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 type="checkbox"/> \$2,001-\$3,000 <input checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Orange County Vector Control District Board of Directors	▶ Name <u>Daigle, Leslie</u> <small>(Last, First)</small> Alternate, if any <u>NA</u> <small>(Last, First)</small>	▶ <u>01 / 10 / 12</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 checked="" type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Orange County Sanitation District (OCSD)	▶ Name <u>Rosansky, Steve</u> <small>(Last, First)</small> Alternate, if any <u>Daigle, Leslie</u> <small>(Last, First)</small>	▶ <u>01 / 10 / 12</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"/> \$5,100.00 <small>Other</small>
San Joaquin Transportation Corridor Joint Powers Agency Board of Directors	▶ Name <u>Hill, Rush</u> <small>(Last, First)</small> Alternate, if any <u>Curry, Keith</u> <small>(Last, First)</small>	▶ <u>01 / 10 / 12</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 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 18705.5. I have verified that the appointment and information identified above is true to the best of my information and belief.


Leilani I. Brown
City Clerk
06/15/2012
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____