

Agency Report of: Public Official Appointments

A Public Document

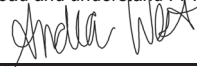
1. Agency Name Orange County Transportation Authority			California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Andrea West, Interim Clerk of the Board			
Area Code/Phone Number 714-560-5676	E-mail clerkoffice@octa.net	Page <u>1</u> of <u>1</u>	Date Posted: <u>02/26/25</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
Southern California Regional Rail Authority	▶ Name <u>Chaffee, Doug</u> <small>(Last, First)</small> Alternate, if any <u>Dumitru, John</u> <small>(Last, First)</small>	▶ <u>01 / 27 / 25</u> <small>Appt Date</small> ▶ <u>1</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>\$6,000</u> <small>Other</small>
Southern California Regional Rail Authority	▶ Name <u>Nguyen, T. Tam</u> <small>(Last, First)</small> Alternate, if any <u>Carroll, Mike</u> <small>(Last, First)</small>	▶ <u>01 / 27 / 25</u> <small>Appt Date</small> ▶ <u>1</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>\$6,000</u> <small>Other</small>
Southern California Association of Governments - Regional Council	▶ Name <u>Leon, Carlos A.</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	▶ <u>01 / 27 / 25</u> <small>Appt Date</small> ▶ <u>1</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 type="checkbox"/> \$1,001-\$2,000 <input checked="" type="checkbox"/> <u>8,640</u> <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>

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.

 _____ <small>Signature of Agency Head or Designee</small>	Andrea West _____ <small>Print Name</small>	Clerk of the Board _____ <small>Title</small>	02/26/25 _____ <small>(Month, Day, Year)</small>
---	--	--	---

Comment: _____