Agency Report of:
Public Official Appointments

A Public Document

California Form 806

For Official Use Only

1. Agency Name

City of Los Alamitos

Division, Department, or Region *(If Applicable)*

City Clerk's Office

Designated Agency Contact *(Name, Title)*

Windmera Quintanar, MMC, City Clerk

Area Code/Phone Number	E-mail
(562) 431-3538	wquintanar@cityoflosalamitos.org

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Date Posted: 12/20/22 *(Month, Day, Year)*

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Orange County Fire Authority - Board of Directors	Name: Hasselbrink, Shelley *(Last, First)* Alternate, if any: n/a *(Last, First)*	12 / 19 / 22 *Appt Date* 1 year *Length of Term*	*Per Meeting:* $ 100 *Estimated Annual:* ☐ $0-$1,000 ☐ $2,001-$3,000 ☒ $1,001-$2,000 ☐ ____ *Other*
Orange County Sanitation District - Board of Directors	Name: Nefulda, Jordan *(Last, First)* Alternate, if any: Hibard, Emily *(Last, First)*	12 / 19 / 22 *Appt Date* 1 year *Length of Term*	*Per Meeting:* $ 212.50 *Estimated Annual:* ☐ $0-$1,000 ☒ $2,001-$3,000 ☐ $1,001-$2,000 ☐ ____ *Other*
Orange County Mosquito and Vector Control District	Name: Doby, Tanya *(Last, First)* Alternate, if any: n/a *(Last, First)*	12 / 13 / 21 *Appt Date* 2 year *Length of Term*	*Per Meeting:* $ 100 *Estimated Annual:* ☐ $0-$1,000 ☐ $2,001-$3,000 ☒ $1,001-$2,000 ☐ ____ *Other*
	Name: ____ *(Last, First)* Alternate, if any: ____ *(Last, First)*	___ / ___ / ___ *Appt Date* ____ *Length of Term*	*Per Meeting:* $ ____ *Estimated Annual:* ☐ $0-$1,000 ☐ $2,001-$3,000 ☐ $1,001-$2,000 ☐ ____ *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	Print Name	Title	(Month, Day, Year)
	Windmera Quintanar, MMC	City Clerk	12-20-22

Comment: ____