

Agency Report of: Public Official Appointments

A Public Document


1. Agency Name City of Redlands		California Form 806 For Official Use Only
Division, Department, or Region (If Applicable) City Council		
Designated Agency Contact (Name, Title) Jeanne Donaldson, City Clerk		
Area Code/Phone Number (909) 798-7532	E-mail jdonaldson@cityofredlands.org	Page <u>1</u> of <u>1</u>
		Date Posted: 02/09/23 <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
Omnitrans	Name <u>Davis, Denise</u> <small>(Last, First)</small> Alternate, if any <u>Saucedo, Mario</u> <small>(Last, First)</small>	Appt Date <u>1/15/2019</u> <small>Appt Date</small> Length of Term <u>Indefinite</u> <small>Length of Term</small>	Per Meeting: \$ <u>125.00</u> Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
San Bernardino County Transportation Authority (SBCTA)	Name <u>Barich, Paul</u> <small>(Last, First)</small> Alternate, if any <u>Saucedo, Mario</u> <small>(Last, First)</small>	Appt Date <u>2/16/2021</u> <small>Appt Date</small> Length of Term <u>Indefinite</u> <small>Length of Term</small>	Per Meeting: \$ <u>250.00</u> Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> <u>Other</u>
	Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	Appt Date _____ <small>Appt Date</small> Length of Term _____ <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"/> <u>Other</u>
	Name _____ <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	Appt Date _____ <small>Appt Date</small> Length of Term _____ <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"/> <u>Other</u>

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>	<u>Jeanne Donaldson</u> <small>Print Name</small>	<u>City Clerk</u> <small>Title</small>	<u>02/09/2023</u> <small>(Month, Day, Year)</small>
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Comment: _____