


**Agency Report of:  
Public Official Appointments**

**A Public Document**


<b>1. Agency Name</b> City of El Cajon		 2025 DEC 12 A 7:38	<b>California Form 806</b>
Division, Department, or Region (If Applicable) City Council			For Official Use Only
Designated Agency Contact (Name, Title) Angela L. Cortez, CMC, City Clerk			Date Posted: 12/12/25 <small>(Month, Day, Year)</small>
Area Code/Phone Number 619-441-1763	E-mail acortez@elcajon.gov	Page 1 of 2	

**2. Appointments**

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
San Diego Association of Governments (SANDAG) Board of Directors	▶ Name <u>Wells, Bill</u> <small>(Last, First)</small>  Alternate, if any <u>Goble, Steve</u> <small>(Last, First)</small>	▶ <u>12/9/2025</u> <small>Appt Date</small>  ▶ <u>12 mo</u> <small>Length of Term</small>	▶ Per Meeting: \$ <u>150.00</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
SANDAG, Public Safety Committee	▶ Name <u>Wells, Bill</u> <small>(Last, First)</small>  Alternate, if any <u>Goble, Steve</u> <small>(Last, First)</small>	▶ <u>12/9/2025</u> <small>Appt Date</small>  ▶ <u>12 mo</u> <small>Length of Term</small>	▶ 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
Heartland Communications	▶ Name <u>Kendrick, Gary</u> <small>(Last, First)</small>  Alternate, if any <u>Metschel, Michelle</u> <small>(Last, First)</small>	▶ <u>12/9/2025</u> <small>Appt Date</small>  ▶ <u>12 mo</u> <small>Length of Term</small>	▶ 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
Heartland Fire Training, JPA	▶ Name <u>Kendrick, Gary</u> <small>(Last, First)</small>  Alternate, if any <u>Metschel, Michelle</u> <small>(Last, First)</small>	▶ <u>12/9/2025</u> <small>Appt Date</small>  ▶ <u>12 mo</u> <small>Length of Term</small>	▶ 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

**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.

	Angela L. Cortez, CMC	City Clerk	12/12/2025
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: \_\_\_\_\_

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Clear

