Docusign Envelope ID: CC7968BA-3606-8961-83A4-D281F3224058

EXHIBIT IV
FEE CHECKLIST FOR ASR SUBMISSION

Attachment B

DESCRIPTION

County Agencies & Departments are generally responsible for all aspects of their fees. **Three weeks** prior to filing the ASR for proposed fee updates with the Clerk of the Board, the department/agency must submit the ASR, Fee Checklist, and appropriate documentation to allow adequate time for the CEO and Auditor-Controller to perform a limited review. The Fee Checklist signed by both the CEO and Auditor-Controller must be attached to the ASR.

DEPT./AGENCY: JOHN WAYNE AIRPORT DATE: 10/12/2026

DEPT./AGENCY CONTACT: ROSANNE JIN PHONE NO.: 949-252-5191

Description of proposed fee contained in ASR:

User Fees: Airport ID Badge, Lost Airport ID Badge, Badging Endorsement, Missed Badging Appointment /Reactivation

Amount of annual revenue related to this proposal:

$413,400

Answer the following questions and check appropriate boxes.	Check One YES	NO	N/A
BACKGROUND:			
1. Is this a revision of existing fee(s)? If YES, when were the fee(s) last revised? 01/29/2008 *Attach a fee schedule that includes a comparison between current and proposed fees.*	☑	☐	☐
2. Are there any new fee(s)?	☑	☐	☐
3. When will the fee(s) be effective? Date: 01/01/2027			
LEGAL CONSIDERATIONS:			
4. Has legal authority for the fee been reviewed?	☑	☐	☐
5. Is the fee request consistent with the legal authority to levy?	☑	☐	☐
6. Cite the legal authority of the fee and attach a copy of the reference code(s). Board Resolution No. 87-825, Orange County Codified Ordinance section 2-1-1, and Federal Register Vol. 78, No. 175 Policy Regarding Airport Rates and Charges.			
7. Does the fee(s) meet one of Proposition 26's exceptions (Note 1)? If "NO" is checked, please contact your CEO Budget Analyst. If "YES" is checked, please list the exception(s). If necessary, please provide attachments. California Constitution Section 1 Article XIII C: (e)(2) A charge imposed for a specific government service or product provided directly to the payor that is not provided to those not charged, and which does not exceed the reasonable costs to the local government of providing the service or product.	☑	☐	☐
8. Is the drafted Board Resolution or ordinance language (if required) attached?	☑	☐	☐
COMMUNICATIONS			
9. List county and non-county departments, agencies, organization and/or communities impacted by the fee(s), if applicable			
a. Tenants, sub-tenants, contractors, and individuals requiring a JWA security badge. Have they been notified?	☐	☐	☑
Has the fee been coordinated with them?	☐	☐	☑
10. Have all advisory board and public hearing concurrencies been finalized?	☐	☑	☐
FEE CALCULATIONS			
11. Is full cost recovery planned in the fee calculation? If not, Please provide an explanation.	☑	☐	☐

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EXHIBIT IV
FEE CHECKLIST FOR ASR SUBMISSION

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12. Are the proposed fee(s) derived from a cost basis analysis? If YES, Please complete questions 13 through 16. If NO, please provide explanation. ☑ ☐ ☐
13. Is agency/department indirect cost included in the fee calculation? ☐ ☑ ☐
14. Is the County General support service costs as determined by the County Wide Cost Allocation Plan (CWCAP) included in the fee calculation? ☑ ☐ ☐
15. Identification of the costs related to this fee proposal:

Personnel (Salaries & Employee Benefits)	$	730,888.00
Services and Supplies	$	239,640.00
Equipment	$	4,323.00
Department/Agency Indirect Costs	$	0.00
County General support service costs (CWCAP)	$	19,604.00
Other	$	0.00
Total	$	994,455.00

16.

*Initial Fiscal Year			*Projected Fiscal Year		
Costs:	$	994,455.00	Costs:	$	994,455.00
Revenue:	$	240,252.00	Revenue:	$	413,400.00
Other Sources:	$	754,203.00	Other Sources:	$	581,055.00

* Costs, revenue, and NCC including cost and revenue related to this fee update.

17. Revenue Coding:

FUND	DEPT	BUDGET CONTROL	UNIT	REVENUE SOURCE	DEPT REVENUE SOURCE
280	280	280	0600	7590	9220
280	280	280	0600	7590	9225

Dept./Agency Authorized Signature — Signed by: C63C6A8DAB6D48C... — Print Name: Hector Gomez — Date: 10/12/2026

Auditor-Controller Signature — Signed by: Faran Eskandari 2A055F23B4B94BB... — Print Name: Faran Eskandari — Date: 10/12/2026

CEO Signature — DocuSigned by: Robin Hinds 83BE214CBA954A9... — Print Name: Robin Hinds — Date: 10/13/2026

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EXHIBIT IV
FEE CHECKLIST FOR ASR SUBMISSION

Note 1: California State Constitution, Article XIII C, § 1 (e), 2(d), (Proposition 26, November 3, 2010) Requires a fee or charge that does not fall within the seven exceptions listed in Proposition 26 is deemed a tax which must be approved by the voter.

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EXHIBIT IV
FEE CHECKLIST FOR ASR SUBMISSION

Attachment B

DESCRIPTION

County Agencies & Departments are generally responsible for all aspects of their fees. **Three weeks** prior to filing the ASR for proposed fee updates with the Clerk of the Board, the department/agency must submit the ASR, Fee Checklist, and appropriate documentation to allow adequate time for the CEO and Auditor-Controller to perform a limited review. The Fee Checklist signed by both the CEO and Auditor-Controller must be attached to the ASR.

DEPT./AGENCY: JOHN WAYNE AIRPORT DATE: 10/13/2026

DEPT./AGENCY CONTACT: ROSANNE JIN PHONE NO.: 949-252-5191

Description of proposed fee contained in ASR:
Line Service Fuel Safety Training Fee

Amount of annual revenue related to this proposal:
$4,275

Answer the following questions and check appropriate boxes.	Check One YES	NO	N/A
BACKGROUND:			
1. Is this a revision of existing fee(s)? If YES, when were the fee(s) last revised? *Attach a fee schedule that includes a comparison between current and proposed fees.*	☐	☑	☐
2. Are there any new fee(s)?	☑	☐	☐
3. When will the fee(s) be effective? Date: 01/01/2027			
LEGAL CONSIDERATIONS:			
4. Has legal authority for the fee been reviewed?	☑	☐	☐
5. Is the fee request consistent with the legal authority to levy?	☑	☐	☐
6. Cite the legal authority of the fee and attach a copy of the reference code(s). Board Resolution No. 87-825, Orange County Codified Ordinance section 2-1-1, and Federal Register Vol. 78, No. 175 Policy Regarding Airport Rates and Charges.			
7. Does the fee(s) meet one of Proposition 26's exceptions (Note 1)? If "NO" is checked, please contact your CEO Budget Analyst. If "YES" is checked, please list the exception(s). If necessary, please provide attachments. California Constitution Section 1 Article XIII C: (e)(2) A charge imposed for a specific government service or product provided directly to the payor that is not provided to those not charged, and which does not exceed the reasonable costs to the local government of providing the service or product.	☑	☐	☐
8. Is the drafted Board Resolution or ordinance language (if required) attached?	☑	☐	☐
COMMUNICATIONS			
9. List county and non-county departments, agencies, organization and/or communities impacted by the fee(s), if applicable			
a. Off-airport operators engaged in aircraft fueling — Have they been notified?	☐	☐	☑
Has the fee been coordinated with them?	☐	☐	☑
10. Have all advisory board and public hearing concurrencies been finalized?	☐	☑	☐
FEE CALCULATIONS			
11. Is full cost recovery planned in the fee calculation? If not, Please provide an explanation.	☑	☐	☐

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EXHIBIT IV
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12. Are the proposed fee(s) derived from a cost basis analysis? If YES, Please complete questions 13 through 16. If NO, please provide explanation. ☑ ☐ ☐
13. Is agency/department indirect cost included in the fee calculation? ☐ ☑ ☐
14. Is the County General support service costs as determined by the County Wide Cost Allocation Plan (CWCAP) included in the fee calculation? ☐ ☐ ☑
15. Identification of the costs related to this fee proposal:

Personnel (Salaries & Employee Benefits)	$	513.00
Services and Supplies	$	3,762.00
Equipment	$	0.00
Department/Agency Indirect Costs	$	0.00
County General support service costs (CWCAP)	$	0.00
Other	$	0.00
Total	$	4,275.00

16.

*Initial Fiscal Year			*Projected Fiscal Year		
Costs:	$	4,275.00	Costs:	$	4,275.00
Revenue:	$	2,138.00	Revenue:	$	4,275.00
Other Sources:	$	2,137.00	Other Sources:	$	0.00

* Costs, revenue, and NCC including cost and revenue related to this fee update.

17. Revenue Coding:

FUND	DEPT	BUDGET CONTROL	UNIT	REVENUE SOURCE	DEPT REVENUE SOURCE
280	280	280	0600	7590	9230

Dept./Agency Authorized Signature — Signed by: C63C6A8DAB6D48C... — Print Name: Hector Gomez — Date: 10/13/2026

Auditor-Controller Signature — Signed by: Faran Eskandari 2A055F23B4B94BB... — Print Name: Faran Eskandari — Date: 10/13/2026

CEO Signature — DocuSigned by: Robin Hinds 83BE214CBA954A9... — Print Name: Robin Hinds — Date: 10/13/2026

Note 1: California State Constitution, Article XIII C, § 1 (e), 2(d), (Proposition 26, November 3, 2010) Requires a fee or charge that does not fall within the seven exceptions listed in Proposition 26 is deemed a tax which must be approved by the voter.