

**Agency Report of:  
Public Official Appointments**

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**A Public Document**

**1. Agency Name**

County of Sonoma

Division, Department, or Region (If Applicable)

County Administrator's Office

Designated Agency Contact (Name, Title)

Marcie Woychik, Chief Deputy Clerk of the Board

Area Code/Phone Number

707-565-2241

E-mail

Form III  
California

For Official Use Only

Date Posted:

1/12/26

(Month, Day, Year)

**2. Appointments**

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Community Advisory Board of San Francisco Bay Water transit Authority	<p>► Name <u>Rabbitt, David</u> (Last, First)</p> <p>Alternate, if any _____ (Last, First)</p>	<p>► <u>1</u> / <u>13</u> / <u>26</u> Appt Date</p> <p>► <u>1</u> year Length of Term</p>	<p>► Per Meeting: \$ <u>100.00</u></p> <p>► Estimated Annual:</p> <p><input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ Other</p>
Eel Russian River Commission	<p>► Name <u>Gore, James</u> (Last, First)</p> <p>Alternate, if any <u>Hopkins, Lynda</u> (Last, First)</p>	<p>► <u>1</u> / <u>13</u> / <u>26</u> Appt Date</p> <p>► <u>1</u> year Length of Term</p>	<p>► Per Meeting: \$ <u>100.00</u></p> <p>► Estimated Annual:</p> <p><input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ Other</p>
North Bay North Coast Broadband Consortium Oversight Board	<p>► Name <u>Coursey, Chris</u> (Last, First)</p> <p>Alternate, if any <u>Hopkins, Lynda</u> (Last, First)</p>	<p>► <u>1</u> / <u>13</u> / <u>26</u> Appt Date</p> <p>► <u>1</u> year Length of Term</p>	<p>► Per Meeting: \$ <u>100.00</u></p> <p>► Estimated Annual:</p> <p><input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ Other</p>
North Bay Watershed Association	<p>► Name <u>Hermosillo, Rebecca</u> (Last, First)</p> <p>Alternate, if any <u>Rabbitt, David</u> (Last, First)</p>	<p>► <u>1</u> / <u>13</u> / <u>26</u> Appt Date</p> <p>► <u>1</u> year Length of Term</p>	<p>► Per Meeting: \$ <u>100.00</u></p> <p>► Estimated Annual:</p> <p><input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000</p> <p><input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> _____ Other</p>

**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.

Marcie Woychik

Chief Deputy Clerk of the Boar

1/12/26

Signature of Agency Head or Designee

Print Name

Title

(Month, Day, Year)

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