


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)		Date Posted: 1/12/26 (Month, Day, Year)
Marcie Woychik, Chief Deputy Clerk of the Board		
Area Code/Phone Number	E-mail	
707-565-2241		Page <u>2</u> of <u>4</u>

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	Name <u>Rabbitt, David</u> <small>(Last, First)</small> Alternate, if any _____ <small>(Last, First)</small>	1 / 13 / 26 <small>Appt Date</small> 1 year <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 _____
Eel Russian River Commission	Name <u>Gore, James</u> <small>(Last, First)</small> Alternate, if any <u>Hopkins, Lynda</u> <small>(Last, First)</small>	1 / 13 / 26 <small>Appt Date</small> 1 year <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 _____
North Bay North Coast Broadband Consortium Oversight Board	Name <u>Coursey, Chris</u> <small>(Last, First)</small> Alternate, if any <u>Hopkins, Lynda</u> <small>(Last, First)</small>	1 / 13 / 26 <small>Appt Date</small> 1 year <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 _____
North Bay Watershed Association	Name <u>Hermosillo, Rebecca</u> <small>(Last, First)</small> Alternate, if any <u>Rabbitt, David</u> <small>(Last, First)</small>	1 / 13 / 26 <small>Appt Date</small> 1 year <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.

_____	Marcie Woychik	Chief Deputy Clerk of the Board	1/12/26
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

Comment: _____