## Agency Report of: **Public Official Appointments**





# **A Public Document**

## 1.

1. Agency Name			California
County of Sono	ma		Form 806
Division, Depart	ment, or Region (If Applicable)		For Official Use Only
County Adminis	trator's Office		
Designated Agency Contact (Name, Title)			
Marcie Woychik, Chief Deputy Clerk of the Board			Data Daata da
Area Code/Phon 707-565-2241	e Number E-mail	Page <u>1</u> of <u>4</u>	Date Posted: 

#### 2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Bay Area Air Quality Management District	Hopkins, Lynda Name	<ul> <li><u>1</u> / <u>6</u> / <u>25</u> <i>Appt Date</i> </li> <li><u>4</u> years <i>Length of Term</i> </li> </ul>	▶ Per Meeting: \$       100.00         ▶ Estimated Annual:         ⊠ \$0-\$1,000       \$2,001-\$3,000         □ \$1,001-\$2,000
Bay Conservation Development Commission	Name Hermosillo, Rebecca (Last, Fist) (Last, Fist) Alternate, if any (Last, First)	<ul> <li><u>1</u> / <u>7</u> / <u>25</u> <i>Appt Date</i> </li> <li><u>1 year</u> <i>Length of Term</i> </li> </ul>	▶ Per Meeting: \$       100.00         ▶ Estimated Annual:         □\$0-\$1,000       \$2,001-\$3,000         ⊠\$1,001-\$2,000
Association of Bay Area Governments	Name <u>Rabbitt, David</u> Name <u>(Last, First)</u> <u>(Last, First)</u> Alternate, if any <u>(Last, First)</u>	<ul> <li>7 / <u>1</u> / <u>24</u></li> <li><u>2 years</u></li> <li>Length of Term</li> </ul>	▶ Per Meeting: \$       150.00         ▶ Estimated Annual:         ⊠ \$0-\$1,000       \$2,001-\$3,000         □ \$1,001-\$2,000
Golden Gate Bridge District	Name <u>(Last, Frst)</u> Alternate, if any(Last, Frst)	<ul> <li><u>1</u> / <u>7</u> / <u>25</u> Appt Date</li> <li><u>2 years</u> Length of Term</li> </ul>	▶ Per Meeting: \$

#### 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

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Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

Comment:

1/3/25