

**Agency Report of:  
Public Official Appointments**

**A Public Document**

<b>1. Agency Name</b>		<b>California Form 806</b>	<b>For Official Use Only</b>
County of Sonoma			
Division, Department, or Region <i>(If Applicable)</i>			
County Administrator's Office			
Designated Agency Contact <i>(Name, Title)</i>		Date Posted: <b>1/4/2021</b> <small><i>(Month, Day, Year)</i></small>	
Marcie Woychik, Chief Deputy Clerk of the Board			
Area Code/Phone Number	E-mail	Page <u>3</u> of <u>4</u>	
707-565-2241			

**2. Appointments**

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
North Bay Water Reuse Authority - Sonoma County Water Agency Representative	▶ Name <u>Rabbitt, David</u> <small><i>(Last, First)</i></small>	▶ <u>2 / 1 / 22</u> <small><i>Appt Date</i></small>	▶ Per Meeting: \$ <u>100.00</u>
	Alternate, if any <u>Gorin, Susan</u> <small><i>(Last, First)</i></small>	▶ <u>1 year</u> <small><i>Length of Term</i></small>	▶ 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"/> <u>Other</u>
North Coast Resource Partnership	▶ Name <u>Gore, James &amp; Hopkins, Lynda</u> <small><i>(Last, First)</i></small>	▶ <u>2 / 1 / 22</u> <small><i>Appt Date</i></small>	▶ Per Meeting: \$ <u>100.00</u>
	Alternate, if any _____ <small><i>(Last, First)</i></small>	▶ <u>1 year</u> <small><i>Length of Term</i></small>	▶ 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"/> <u>Other</u>
North Bay Water Reuse Authority - Sonoma Valley County Sanitation District Representative	▶ Name <u>Gorin, Susan</u> <small><i>(Last, First)</i></small>	▶ <u>2 / 1 / 22</u> <small><i>Appt Date</i></small>	▶ Per Meeting: \$ <u>100.00</u>
	Alternate, if any <u>Rabbitt, David</u> <small><i>(Last, First)</i></small>	▶ <u>1 year</u> <small><i>Length of Term</i></small>	▶ 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"/> <u>Other</u>
Northern California Counties Tribal Consortium	▶ Name <u>Rabbitt, David</u> <small><i>(Last, First)</i></small>	▶ <u>2 / 1 / 22</u> <small><i>Appt Date</i></small>	▶ Per Meeting: \$ <u>100.00</u>
	Alternate, if any <u>Gore, James</u> <small><i>(Last, First)</i></small>	▶ <u>1 year</u> <small><i>Length of Term</i></small>	▶ 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"/> <u>Other</u>

**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	2/8/22
<small><i>Signature of Agency Head or Designee</i></small>	<small><i>Print Name</i></small>	<small><i>Title</i></small>	<small><i>(Month, Day, Year)</i></small>

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