Agency Report of:
Public Official Appointments

A Public Document

1. Agency Name

Golden Gate Bridge, Highway and Transportation District

Division, Department, or Region *(If Applicable)*

Board of Directors

Designated Agency Contact *(Name, Title)*

Amorette M. Ko-Wong, Secretary of the District

Area Code/Phone Number	**E-mail**	Page 1 of 1	**Date Posted:**
415/923-2223	districtsecretary@goldengate.org		02/13/2025
			(Month, Day, Year)

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Sonoma-Marin Area Rail Transit Board of Directors	▶Name **Pahre, Barbara** *(Last, First)* Alternate, if any _____ *(Last, First)*	▶ **2/1/2025** *Appt Date* ▶ **2 Years** *Length of Term*	▶ *Per Meeting:* $ **$100.00** ▶ *Estimated Annual:* ☐ $0-$1,000　☐ $2,001-$3,000 ■ $1,001-$2,000　☐ ___ *Other*
Sonoma-Marin Area Rail Transit Board of Directors	▶Name **Garbarino, Patricia** *(Last, First)* Alternate, if any _____ *(Last, First)*	▶ **2/1/2025** *Appt Date* ▶ **2 Years** *Length of Term*	▶ *Per Meeting:* $ **100.00** ▶ *Estimated Annual:* ☐ $0-$1,000　☐ $2,001-$3,000 ■ $1,001-$2,000　☐ ___ *Other*
	▶Name _____ *(Last, First)* Alternate, if any _____ *(Last, First)*	▶ _____ *Appt Date* ▶ _____ *Length of Term*	▶ *Per Meeting:* $ _____ ▶ *Estimated Annual:* ☐ $0-$1,000　☐ $2,001-$3,000 ☐ $1,001-$2,000　☐ ___ *Other*
	▶Name _____ *(Last, First)* Alternate, if any _____ *(Last, First)*	▶ _____ *Appt Date* ▶ _____ *Length of Term*	▶ *Per Meeting:* $ _____ ▶ *Estimated Annual:* ☐ $0-$1,000　☐ $2,001-$3,000 ☐ $1,001-$2,000　☐ ___ *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.

Signature of Agency Head or Designee	Amorette M. Ko-Wong *Print Name*	Secretary of the District *Title*	02/13/2025 *(Month, Day, Year)*

Comment: _____

Print　　Clear