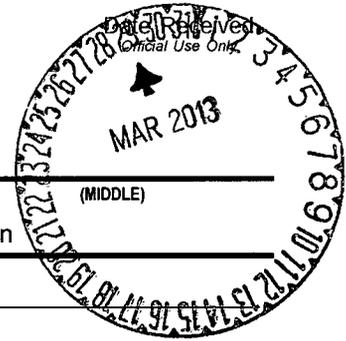


STATEMENT OF ECONOMIC INTERESTS
COVER PAGE



Please type or print in ink.

By BPPC
NAME OF FILER (LAST) David (FIRST) Allen (MIDDLE)

1. Office, Agency, or Court

Agency Name
County of Sonoma
Division, Board, Department, District, if applicable Board of Supervisors
Your Position
Supervisor, Second District

► If filing for multiple positions, list below or on an attachment.

Agency: See Attachment A Position: See Attachment A

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County See Attachment A
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of Sonoma
- Other _____

3. Type of Statement (Check at least one box)

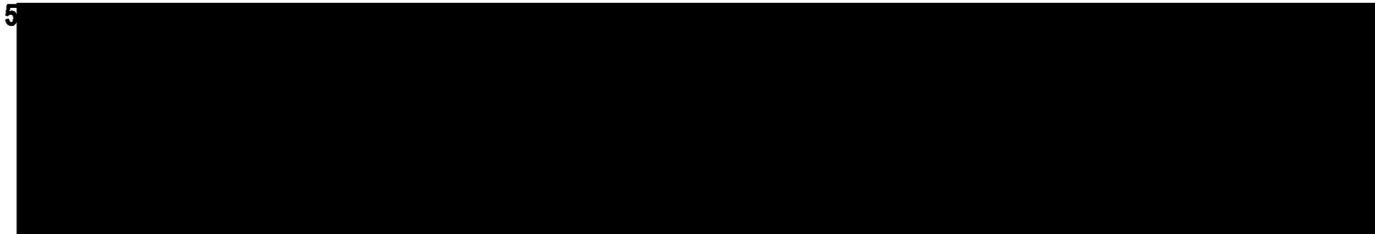
- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is ____/____/____, through December 31, 2012.
- Assuming Office: Date assumed ____/____/____
- Leaving Office: Date Left ____/____/____ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 8

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached
- or-
- None - No reportable interests on any schedule



herein and in any attached schedules is true and complete. I acknowledge and certify under penalty of perjury under the laws of the State of California that the information provided is true and correct.

Date Signed 03/25/2013
(month, day, year)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 David Allen Rabbitt

1. BUSINESS ENTITY OR TRUST

See Attachment

Name
 12 Drakewood Lane, Novato, CA 94947

Address (Business Address Acceptable)

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$0 - \$1,999 / / 12 / / 12
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

None

Bypass Trust of the Henry & Kathleen Rabbitt 1999 Revocable Trust; \$72,000.00

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

53 El Cerrito Avenue, San Anselmo, CA 94960

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
 Single Family Residence

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 / / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST

Name _____

Address (Business Address Acceptable) _____

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$0 - \$1,999 / / 12 / / 12
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property _____

Description of Business Activity or City or Other Precise Location of Real Property _____

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 / / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

Comments: 1/6th Share through Trust

**SCHEDULE D
Income – Gifts**

Name
David Allen Rabbitt

▶ NAME OF SOURCE (Not an Acronym)
Tito Sasaki

ADDRESS (Business Address Acceptable)
P.O.B. 200, Vineburg, CA 95487

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Farmer

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 14 / 12</u>	\$ <u>190.00</u>	<u>Fundraiser Tix</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Bohemian Club

ADDRESS (Business Address Acceptable)
20601 Bohemian Hwy, Monte Rio, CA 95462

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Private Club

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 19 / 12</u>	\$ <u>75.00</u>	<u>Luncheon</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Sonoma Raceway

ADDRESS (Business Address Acceptable)
29355 Arnold Dr., Sonoma, CA 95436

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Speedway

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 26 / 12</u>	\$ <u>198.00</u>	<u>Event Tix</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Frederick A. Goverman

ADDRESS (Business Address Acceptable)
400 Ormsby Lane, Petaluma, CA 94954

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Retired

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 21 / 12</u>	\$ <u>200.00</u>	<u>Fundraiser Tix</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
T.J. Lowe

ADDRESS (Business Address Acceptable)
436 Sierra Vista Rd., Santa Rosa, CA 95401

BUSINESS ACTIVITY, IF ANY, OF SOURCE
CEO / G & G Markets (Grocery)

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 03 / 12</u>	\$ <u>80.00</u>	<u>Fundraiser Tix</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

Comments: _____

ATTACHMENT A

COVER PAGE

MULTIPLE POSITIONS:

<u>JURISDICTION</u>	<u>DEPARTMENT/ENTITY</u>	<u>POSITION</u>
COUNTY OF SONOMA	BOARD OF SUPERVISORS	SUPERVISOR
GF GOLDEN GATE BRIDGE HIGHWAY TRANSPORTATION DISTRICT		DIRECTOR
ASSOCIATION OF BAY AREA GOVERNMENTS		DIRECTOR
SONOMA COUNTY EMPLOYEE RETIREMENT BOARD		TRUSTEE
SONOMA MARIN AREA RAIL TRANSIT		DIRECTOR
NORTH BAY WATER REUSE AUTHORITY		DIRECTOR
SONOMA COUNTY TRANSPORTATION AUTHORITY		DIRECTOR
CALIFORNIA STATE ASSOCIATION OF COUNTIES		DIRECTOR
BUILDING ECONOMIC SUCCESS TOGETHER		DIRECTOR
SUCCESSOR AGENCY, CITY OF PETALUMA		DIRECTOR
SUCCESSOR AGENCY, CITY OF COTATI		DIRECTOR

COVER PAGE

JURISDICTION OF OFFICE

NAME/COUNTIES

COUNTY OF SONOMA

SONOMA

GOLDEN GATE BRIDGE HIGHWAY TRANSPORTATION DISTRICT

DELNORTE, MENDOCINO, SONOMA, NAPA, MARIN, SAN FRANCISCO

ASSOCIATION OF BAY AREA GOVERNMENTS

ALAMEDA, CONTRA COSTA, MARIN, NAPA, SAN FRANCISCO, SAN MATEO,
SANTA CLARA, SOLANO, SONOMA

CALIFORNIA FORM 700

DAVID ALLEN RABBITT

ATTACHMENT A (CON'T)

SONOMA COUNTY EMPLOYEE RETIREMENT BOARD

SONOMA

SONOMA MARIN AREA RAIL TRANSIT

SONOMA, MARIN

NORTH BAY WATER REUSE AUTHORITY

SONOMA, MARIN, NAPA

SONOMA COUNTY TRANSPORTATION AUTHORITY

SONOMA

CALIFORNIA STATE ASSOCIATION OF COUNTIES

ALL CALIFORNIA COUNTIES

BUILDING ECONOMIC SUCCESS TOGETHER

SONOMA

SUCCESSOR AGENCY, CITY OF PETALUMA

CITY OF PETALUMA, COUNTY OF SONOMA

SUCCESSOR AGENCY, CITY OF COTATI

CITY OF COTATI, COUNTY OF SONOMA

SCHEDULE A-2

BUSINESS ENTITY OR TRUST

NAME

BIPASS TRUST OF THE HENRY AND KATHLEEN RABBITT 1999 REVOCABLE TRUST