



# COUNTY OF SONOMA

575 ADMINISTRATION  
DRIVE, ROOM 102A  
SANTA ROSA, CA 95403

## SUMMARY REPORT

**Agenda Date:** 5/12/2026

**To:** Board of Supervisors

**Department or Agency Name(s):** Board of Supervisors

**Staff Name and Phone Number:** Supervisor Lynda Hopkins 707-565-2241

**Vote Requirement:** Majority

**Supervisorial District(s):** Fifth

**Title:**

Fee Waiver - Sebastopol Area Senior Center

**Recommended Action:**

Approve a Fee Waiver of \$1,938.00 to the Sebastopol Area Senior Center for the annual retail food permit. (Fifth District)

**Executive Summary:**

**Discussion:**

Sebastopol Area Senior Center is dedicated to providing fresh, nutritious meals for seniors, their caregivers, and other community members. The Center subsidizes the cost of meals for any senior, and never turns anyone away for lack of ability to pay. Waiving this fee would be helpful for this small nonprofit.

**Strategic Plan:**

**Racial Equity:**

**Was this item identified as an opportunity to apply the Racial Equity Toolkit?**

No

**Prior Board Actions:**

04-19-2022; 04-30-2024; 04-22-2025

**FISCAL SUMMARY**

| <b>Expenditures</b>                | <b>FY25-26<br/>Adopted</b> | <b>FY26-27<br/>Projected</b> | <b>FY27-28<br/>Projected</b> |
|------------------------------------|----------------------------|------------------------------|------------------------------|
| Budgeted Expenses                  |                            |                              |                              |
| Additional Appropriation Requested | \$1,938.00                 |                              |                              |
| <b>Total Expenditures</b>          | <b>\$1,938.00</b>          |                              |                              |
| <b>Funding Sources</b>             |                            |                              |                              |
| General Fund/WA GF                 |                            |                              |                              |
| State/Federal                      |                            |                              |                              |
| Fees/Other                         |                            |                              |                              |

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|----------------------------|-------------------|--|--|
| Use of Fund Balance        |                   |  |  |
| General Fund Contingencies | \$1,938.00        |  |  |
| <b>Total Sources</b>       | <b>\$1,938.00</b> |  |  |

**Narrative Explanation of Fiscal Impacts:**

General Fund Contingences in the amount of \$1,789 is requested for this fee waiver/sponsorship.

**Narrative Explanation of Staffing Impacts (If Required):**

**Attachments:**

Application

**Related Items "On File" with the Clerk of the Board:**