

RECEIVED
MONTEREY COUNTY

JUL 18 2025

CLERK OF THE BOARD

MARGARITA HERNANDEZ

OFFICIAL APPOINTMENT BOARD OF SUPERVISORS

STATE OF CALIFORNIA } ss.

APP 25-072

I, VALERIE RALPH, Clerk of the Board of Supervisors of the County of Monterey, State of California, do hereby certify that at a regular session of said Board held in and for said County of Monterey, on May 13, 2025, ALMA MCHONEY was duly appointed to the Behavioral Health Commission with a term ending on May 31, 2028 in and for Monterey County, State of California, as appears by the Official Records of said Board in my office.



IN WITNESS WHEREOF, I have hereunto affixed my hand and Seal of the Board of Supervisors of the County of Monterey, State of California this June 24, 2025

Board Clerk

STATE OF CALIFORNIA } ss.

Oath of Office

I, ALMA MCHONEY, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter.

Date: July 1, 2025

Alma L. McHoney
(Signature of Appointee)

Subscribed and sworn to (or affirmed) before me on this

VALERIE RALPH
Clerk of the Board of Supervisors

____ day of _____, 20____, by
Date Month Year

(Signature of Person Administering Oath) (Notary Public)

proved to me on the basis of satisfactory evidence to be the person who appeared before me.

(Title)

SEE ATTACHED
FOR CERTIFICATE

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

- ☐ See Attached Document (Notary to cross out lines 1-6 below)
☐ See Statement Below (Lines 1-6 to be completed only by document signer[s], *not* Notary)

1
2
3
4
5
6

Signature of Document Signer No. 1

Signature of Document Signer No. 2 (if any)

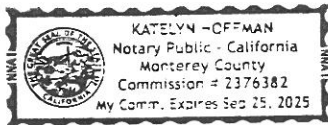
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
 County of Monterey

Subscribed and sworn to (or affirmed) before me
 on this 01 day of July, 2025,
 by Date Month Year

(1) Alma L. McHoney

(and (2) _____),
Name(s) of Signer(s)



proved to me on the basis of satisfactory evidence
 to be the person(s) who appeared before me.

Signature Katelyn Hoffman
Signature of Notary Public

Seal
 Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Official Appointment Document Date: _____
Board of Supervisors
 Number of Pages: _____ Signer(s) Other Than Named Above: _____