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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
MAGSIEG NATHAN Floyd

1. Office, Agency, or Court

Agency Name: The City of Clovis  
Division, Board, Department, District, if applicable: City Council  
Your Position: Councilman

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

Agency: ALUC, CAL-RAND, COG Position: Board member

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

- State [ ] Judge (Statewide Jurisdiction) [ ]
- Multi-County [ ] County of [ ]
- City of Clovis [x] Other [ ]

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

- Annual: The period covered is January 1, 2010, through December 31, 2010. [x] Leaving Office: Date Left [ ] (Check one)
- The period covered is [ ] through December 31, 2010. [ ] The period covered is January 1, 2010, through the date of leaving office. [ ]
- Assuming Office: Date [ ] The period covered is [ ] through the date of leaving office. [ ]
- Candidate: Election Year [ ] Office sought, if different than Part 1: [ ]

4. Schedule Summary

- Check applicable schedules or "None." Total number of pages including this cover page: 4
- Schedule A-1 - Investments - schedule attached [ ]
- Schedule A-2 - Investments - schedule attached [ ]
- Schedule B - Real Property - schedule attached [x]
- Schedule C - Income, Loans, & Business Positions - schedule attached [x]
- Schedule D - Income - Gifts - schedule attached [x]
- Schedule E - Income - Gifts - Travel Payments - schedule attached [ ]
- None - No reportable interests on any schedule [ ]



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

Date Signed: 2/12/2011 (month, day, year) Signature

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
Nathan Magsig

▶ STREET ADDRESS OR PRECISE LOCATION  
41697 E. Tulare

CITY  
Fresno 93702

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 10 DISPOSED 10

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining  \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
EVA Contreras & Housing  
Authority Section 8

▶ STREET ADDRESS OR PRECISE LOCATION  
3504 E. Tulare Iowa

CITY  
Fresno CA, 93702

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 10 DISPOSED 10

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining  \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
No Tenant Pays \$10,000 or  
more per year.

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_%  None TERM (Months/Years) \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* Ken Newfeld Profit Sharing Plan

ADDRESS (Business Address Acceptable) 6442 N. Maroa Ave, Fresno CA

BUSINESS ACTIVITY, IF ANY, OF LENDER Realtor

INTEREST RATE 7.5%  None TERM (Months/Years) 15 year

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
Nathan Mogyig

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
The Coalition For Urban Renewal

ADDRESS (Business Address Acceptable)  
287 W. Fallbrook #104 Fresno

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Non-Profit Construction Company.

YOUR BUSINESS POSITION  
Executive Director

GROSS INCOME RECEIVED  
 \$500 - \$1,000     \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
City of Clovis

ADDRESS (Business Address Acceptable)  
1033 5th Street Clovis

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Government

YOUR BUSINESS POSITION  
Commitman

GROSS INCOME RECEIVED  
 \$500 - \$1,000     \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

**2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*  
Ken Newell Profit Sharing Plan

ADDRESS (Business Address Acceptable)  
6442 N. Marawa

BUSINESS ACTIVITY, IF ANY, OF LENDER  
Realtor

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  
 \$1,001 - \$10,000  
 \$10,001 - \$100,000  
 OVER \$100,000

INTEREST RATE    TERM (Months/Years)  
7.5 %     None    15 years

SECURITY FOR LOAN  
 None     Personal residence  
 Real Property    3504 E. Iowa  
Street address  
Fresno CA, 93702  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income - Gifts**

▶ NAME OF SOURCE  
Victoria Blackwell  
 ADDRESS (Business Address Acceptable)  
642 Pollasky Ave #100  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Marketing

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3/2/2010</u>	<u>\$ 240</u>	<u>8 Disney tickets</u>
<u>4/5/2010</u>	<u>\$ 150</u>	<u>5 Monster Jam Tix</u>
<u>   </u>	<u>\$</u>	<u>   </u>

▶ NAME OF SOURCE  
Ken Crabtree  
 ADDRESS (Business Address Acceptable)  
3591 W. Locust Fresno CA  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Property/Vacant Lot Purchaser.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/5/2010</u>	<u>\$ 100</u>	<u>Pismo Gift Card.</u>
<u>   </u>	<u>\$</u>	<u>   </u>
<u>   </u>	<u>\$</u>	<u>   </u>

▶ NAME OF SOURCE  
Clavis Rodeo Association  
 ADDRESS (Business Address Acceptable)  
P.O. Box 445, Clavis CA 93613  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Non-Profit Rodeo

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4/5/2010</u>	<u>\$ 100</u>	<u>4 Rodeo Passes</u>
<u>   </u>	<u>\$</u>	<u>   </u>
<u>   </u>	<u>\$</u>	<u>   </u>

▶ NAME OF SOURCE  
 \_\_\_\_\_  
 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>

▶ NAME OF SOURCE  
California State University, Fresno  
 ADDRESS (Business Address Acceptable)  
2625 E. Matoman Way SH 124 Fresno  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Alumni Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/15/2010</u>	<u>\$ 200</u>	<u>Parking Pass</u>
<u>9/15/2010</u>	<u>\$ 100</u>	<u>2 Football tix</u>
<u>   </u>	<u>\$</u>	<u>   </u>

▶ NAME OF SOURCE  
 \_\_\_\_\_  
 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: \_\_\_\_\_