

COPY 10/14

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

Date Received
Official Use Only



2013 MAY 8 PM 1:07
A Public Document

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
utting Raymond James

1. Office, Agency, or Court

Agency Name
EL Dorado County Board of Supervisors
Division, Board, Department, District, if applicable
District II
Your Position

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

Agency: EL Dorado County - Northern Calif Position: see original attachment

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

- State
- Multi-County EL Dorado County - Northern Calif
- City of _____
- Judge (Statewide Jurisdiction)
- County of EL Dorado
- Other _____

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

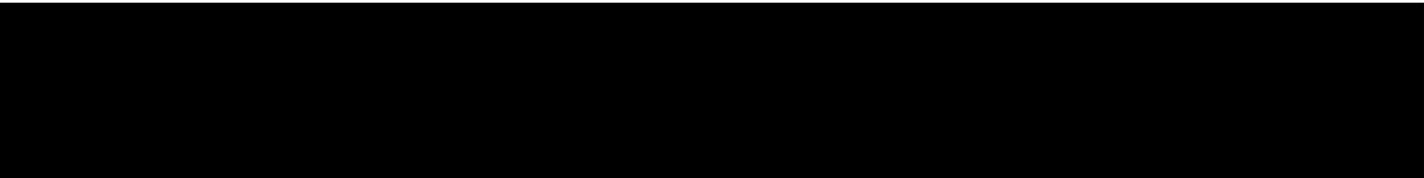
- Annual: The period covered is January 1, 2010, through December 31, 2010.
-or-
The period covered is _____, through December 31, 2010.
- Assuming Office: Date _____
- Candidate: Election Year _____ Office sought, if different than Part 1: _____
- Leaving Office: Date Left _____ (Check one)
 - The period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

4. Schedule Summary

Check applicable schedules or "None."

- 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
 - None - No reportable interests on any schedule
- ▶ Total number of pages including this cover page: _____

5. Verification



I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California

Date Signed 4-9-2013
(month, day, year)

Signature 
(Please do not digitally sign and mark with your filing official.)

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

RECEIVED [△] Date Received
Official Use Only
ELECTIONS DEPARTMENT

GP

11 APR -4 AM 11:45

Please type or print in ink

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Nutting Raymond James

1. Office, Agency, or Court

Agency Name
El Dorado County Board of Supervisors County Supervisor District II
Division, Board, Department, District, if applicable Your Position
See Attached List

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

Agency: _____ Position: _____

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

State Judge (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of _____ Other _____

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

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

4. Schedule Summary

Check applicable schedules or "None."

▶ Total number of pages including this cover page: 311

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

5. Verification

[Redacted Signature Area]

I certify under penalty of perjury under the laws of the State of California that

Date Signed 3/25/11 Signature _____
(month, day, year)

ATTACHMENT A -- EXPANDED STATEMENT

FORM 700 STATEMENT OF ECONOMIC INTEREST

Raymond J. Nutting
Elected Official

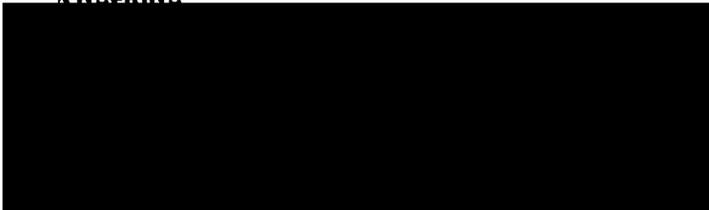
2010
Year

Name of Agency	Office/Position
Board of Supervisors	Member
Bond Authority	Member
Air Pollution Control Board	Member
Board of Equalization	Member
County Service Area #2 (CSA 2)	Member
County Service Area #3 (CSA 3)	Member
County Service Area #3 (CSA 5)	Member
County Service Area #7 (CSA 7)	Member
County Service Area #9 (CSA 9)	Member
County Service Area #10 (CSA 10)	Member
El Dorado County Public Housing Authority	
El Dorado County Redevelopment Agency	
Risk Management Authority	
Abandoned Vehicle Abatement Service JPA	
American River Authority	Alternate
California Identification Random Access Network	Member
California Rural Home Mortgage Finance Authority-Homebuyers Fund	Member
California State Association of Counties (CSAC)	
California Tahoe Conservancy	Alternate
Capital Southeast Connector Joint Powers Authority (Elk Grove-Rancho Cordova-El Dorado)	Alternate
Community Action Council	
El Dorado County Transportation Commission (EDCTC)	Member
Transit Authority - El Dorado County	Alternate
El Dorado County Chamber of Commerce	Member
El Dorado County Water Agency	Member
El Dorado Water and Power Joint Powers Authority - (EDWPA)	Member
Environmental Services Joint Powers Authority	
Evelyn Horn Scholarship Commission	Alternate
First 5 El Dorado - Children and Families Commission	
Folsom City/El Dorado County Joint Powers Authority	Member
Golden Chain Council of Mother Lode Incorporated	
Golden Sierra Job Training Agency	
High Sierra Resource Conservation Council (RC&D)	Member
Local Agency Formation Commission (LAFCO)	Alternate
Local Enforcement Agency Independent Hearing Panel	Member
Mental Health Commission	

Name of Agency	Office/Position
Mt. Counties Water Resources Agency	
Mt. Counties Air Basin Control Council	Alternate
National Association of Counties (NACO)	Member
Regional Council of Rural Counties (RCRC)	Member
Sacramento Area Commerce & Trade Organization (SACTO)	
Sacramento Area Council of Governments (SACOG)/Capitol Valley Regional Service Authority for Freeways and Expressways	Alternate
Sac/Placerville Transportation Corridor JPA	
Sacramento Sierra Valley Children's Health Initiative, Regional Governance Group	
Sac/Mother Lode Regional Association of County Supervisors	
Sierra Economic Development District Board (SEDD)	
Sierra Planning Organization (SPO)	
Sierra Nevada Conservancy	
So. Lake Tahoe Basin Waste Management Authority	Alternate
So. Lake Tahoe Recreation Facilities Joint Powers Authority	Alternate
South Lake Tahoe Chamber of Commerce	Alternate
Tahoe Conservancy	Alternate
Tahoe Paradise Resort Improvement District	
Tahoe Regional Planning Agency (TRPA)	Alternate
Tahoe Transportation Authority	Alternate
Veterans Coordinating Council	
Water Purveyors/Water Agency Advisory	

Member

Alternate



Signature of Elected Official

3-25-11

Date

List of Member Counties

- El Dorado County
- Sacramento County
- Placer County
- Yolo County
- Sutter County
- Yuba County

**FPPC Form 700 "Statement of Economic Interest"
Out of County Agencies**

American River Authority
c/o Placer County Water Agency
Attention: Barbara Sloan
P.O. Box 6570
Auburn, CA 95604

California Rural Home Mortgage Finance Authority

California State Association of Counties (CSAC)
1100 K Street, Suite 101
Sacramento, CA 95814-3914

Chula Vista-El Dorado-Livermore-Menlo Park
Mortgage Revenue Bonds Authority
County of El Dorado Administrative Office

Folsom City/EDC Joint Powers Authority
City of Folsom
Attention:

Golden Chain Council of Mother Lode, Inc.
P.O. Box 5142
Newcastle, CA 95658

Golden Sierra Job Training Agency
11549 F Avenue
DeWitt Center
Auburn, CA 95603

High Sierra Resource Conservation Council
251 Auburn Ravine #201
Auburn, CA 95603

Mountain Counties Water Resources Association
P.O. Box 667
San Andreas, CA 95249

Mountain Counties Air Basin Control Council
Placer County for 1998

Regional Council of Rural Counties (RCRC)
1020 12th Street, Suite 200-A
Sacramento, CA 95814

**FPPC Form 700 "Statement of Economic Interest"
Out of County Agencies (cont)**

Sacramento Area Commerce & Trade Organization (SACTO)
300 Capital Mall, Suite 1210
Sacramento, CA 95814

Sacramento Area Council of Governments (SACOG)
3000 S Street, Suite 300
Sacramento, CA 95816

Sacramento/Placerville Transportation Corridor JPA
c/o Sacramento Regional Transit District
Attention: Kelly Breese
2811 O Street
Sacramento, CA 95816

Sacramento/Mother Lode Regional Association of County Supervisors

Sierra Economic Development District (SEDD)
Sierra Planning Organization
560 Wall Street, Suite K
Auburn, CA 95603

1/2011

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest Is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Reymond James Nutting

▶ NAME OF BUSINESS ENTITY
Main Street Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
2901 Anderson Way, Placerville, CA 95667

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other Trustee
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Heppy Valley Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
8421 Heppy Valley Road, Somerset, CA 95684

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other Trustee
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Main Street Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
50 Meln Street, Placerville, CA 95667

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other Trustee
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Foml Roed Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Placerville, CA 95667

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other Trustee
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Nutting Chlropractic Assst Management

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
50 Meln Street, Placerville, CA 95667

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other Trustee
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, UST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Angel Court Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
2001 Angel Court, Placerville, CA 95667

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other Trustee
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

Comments: _____

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
Raymond James Nutting

▶ 1. BUSINESS ENTITY OR TRUST

Dramatics Hair Studios

Name
 305D Sly Park Road, Pollock Pines, CA 95726

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:

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

NATURE OF INVESTMENT
 Sole Proprietorship Partnership _____ Other

YOUR BUSINESS POSITION co-owner w/spouse

▶ 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)

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

Check one box:
 INVESTMENT REAL PROPERTY

APN 041-250-36-100

Name of Business Entity or
 Street Address or Assessor's Parcel Number of Real Property

Nutting Way, Grizzly Flats, CA 95684

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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

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

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____
 Yrs. remaining

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

Comments: co-owner w/spouse

▶ 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:

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

NATURE OF INVESTMENT
 Sole Proprietorship Partnership _____ 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)

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

Check one box:
 INVESTMENT REAL PROPERTY

APN 041-250-38-100

Name of Business Entity or
 Street Address or Assessor's Parcel Number of Real Property

Nutting Way, Grizzly Flats, CA 95684

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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

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

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____
 Yrs. remaining

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

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name
Raymond James Nutting

► STREET ADDRESS OR PRECISE LOCATION
4972 Edgewood Circle
 CITY
Grizzly Flats, CA 95684

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

IF APPLICABLE, LIST DATE:
 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.
Ryen Smiley

► STREET ADDRESS OR PRECISE LOCATION
8161 Happy Valley Road
 CITY
Somerset, CA 95684

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

IF APPLICABLE, LIST DATE:
 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.

* 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 _____ TERM (Months/Years) _____
 _____ % None
 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* _____
 ADDRESS (Business Address Acceptable) _____
 BUSINESS ACTIVITY, IF ANY, OF LENDER _____
 INTEREST RATE _____ TERM (Months/Years) _____
 _____ % None
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

**SCHEDULE D
 Income – Gifts**

Name
Raymond James Nutting

▶ NAME OF SOURCE
Sierra @ Tahoe
 ADDRESS (Business Address Acceptable)
1111 Sierra@Tahoe, Twin Bridges, CA 95735
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / / 10	\$ 280.00	4-Ski Lift Tickets
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Raymond James Nutting
--

- **Reminder – you must mark the gift or income box.**
- **You are not required to report income from government agencies.**
- **You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.**

▶ NAME OF SOURCE
 Rural Council of Rural Counties

ADDRESS (Business Address Acceptable)
 1215 K Street, Suite 1650

CITY AND STATE
 Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): 01 / 13 / 10 AMT: \$ 794.15
(if applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION: _____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____ / ____ / ____ AMT: \$ ____
(if applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION: _____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____ / ____ / ____ AMT: \$ ____
(if applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION: _____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____ / ____ / ____ AMT: \$ ____
(if applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION: _____

Comments: _____

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FAIR POLITICAL
PRACTICES COMMISSION

SCHEDULE B

Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

11 SEP 13 PM 4:09

STREET ADDRESS OR PRECISE LOCATION
4972 Edgewood Circle

CITY
Grizzly Flats CA 95684

FAIR MARKET VALUE IF APPLICABLE, LIST DATE

\$2,000 - \$10,000

\$10,001 - \$100,000

\$100,001 - \$1,000,000

Over \$1,000,000

IF APPLICABLE, LIST DATE

1 / 10 / 10

ACQUIRED DISPOSED

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.

Ryan Smiley

STREET ADDRESS OR PRECISE LOCATION
8161 Happy Valley Road

CITY
Somerset, CA 95684

FAIR MARKET VALUE IF APPLICABLE, LIST DATE

\$2,000 - \$10,000

\$10,001 - \$100,000

\$100,001 - \$1,000,000

Over \$1,000,000

IF APPLICABLE, LIST DATE

1 / 10 / 10

ACQUIRED DISPOSED

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.

* 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:

Comments: _____

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)

 % None

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000 \$1,001 - \$10,000

\$10,001 - \$100,000 OVER \$100,000

Guarantor, if applicable

Verification

Print Name Raymond J. Nutting

Office, Agency or Court Elk Grove - Rancho Cordova - El Dorado Connector

Statement Type 2010/2011 Annual Assuming Leaving

Annual Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify
Call for
Date
Signature

SCHEDULE E
Income - Gifts

11 SEP 13 PM 4:09

D

**Travel Payments, Advances,
and Reimbursements**

RECEIVED
SEP 07 2011

- Reminder - you must mark the gift or income box.
- You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

▶ NAME OF SOURCE
Rural Council of Rural Counties

ADDRESS (Business Address Acceptable)
1215 K. Street, Ste. 1650

CITY AND STATE
Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): 01/13/10 AMT: \$ 794.15
(If applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION: Annual meeting of Rural Council of Rural Counties in Napa County

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): / / AMT: \$
(If applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION:

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): / / AMT: \$
(If applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION:

Verification

Print Name Raymond J. Nutting

Office, Agency or Court Elk Grove-Rancho Cordova El Dorado Connector

Statement Type 2010/2011 Annual Assuming Leaving
 Annual Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that

Date Signed

Signature

Comments:



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

1. BUSINESS ENTITY OR TRUST

Name Nutting Ranch**
 Address (Business Address Acceptable)
8161 Happy Valley Road, Somersset, CA 95684
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Forested Ranchland

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$0 - \$1,999		
<input type="checkbox"/> \$2,000 - \$10,000	<u> </u> / <u> </u> / <u>12</u>	<u> </u> / <u> </u> / <u>12</u>
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INVESTMENT
 Sole Proprietorship Partnership Other

YOUR BUSINESS POSITION Property Owner

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:	
<input type="checkbox"/> \$2,000 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000	<u> </u> / <u> </u> / <u>12</u>	<u> </u> / <u> </u> / <u>12</u>
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED	DISPOSED
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold Vrs. remaining Other
 Check box if additional schedules reporting Investments or real property are attached

Comments: Amendment is providing additional information for this schedule and is not a substitution for the original filing.

Filer's Verification

Print Name Ray Nutting
 Office, Agency or Court El Doredo County Board of Supervisors
 Statement Type 2012/2013 Annual 2010 Annual Assuming Leaving Candidate
(yr)

I have used all reasonable diligence in preparing this statement. I have reviewed and the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the information provided is true and complete.

Date Signed July 10, 2013 Filer's Signature
(month, day, year)

