

STATEMENT OF ECONOMIC INTERESTS

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PRACTICES COMMISSION
COVER PAGE

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Please type or print in ink.

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Salinas, Simon

1. Office, Agency, or Court

Agency Name

Monterey County Board of Supervisors

Division, Board, Department, District, if applicable

Your Position

District 3

Supervisor

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

Agency: See attachment

Position: Commissioner/Board Member

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

State

Judge (Statewide Jurisdiction)

Multi-County XX

County of Monterey

City of _____

Other _____

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

Annual: The period covered is January 1, 2010, through December 31, 2010.

Leaving Office: Date Left ____/____/____
(Check one)

-or-

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: 6

Schedule A-1 - Investments - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

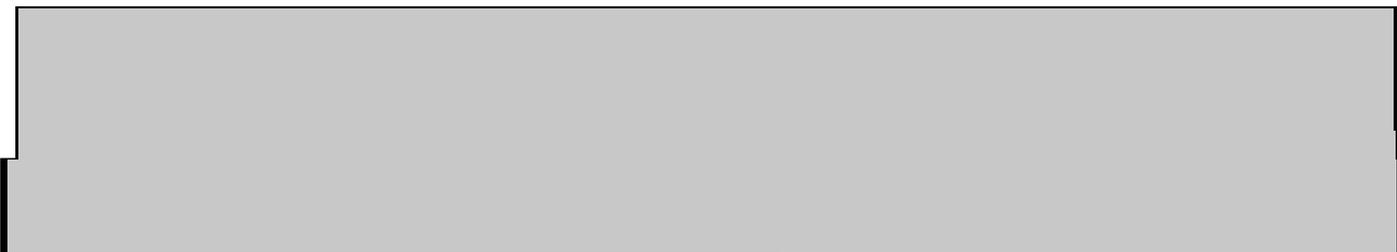
Schedule D - Income - Gifts - schedule attached

Schedule B - Real Property - 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 this is
I certify under penalty of perjury under the laws of the State of California that

Date Signed 03/21/2011
(month, day, year)

Signature

Section 1 Additional Agency(ies)/Position(s) for Salinas, Simon:

Agency	Position
Local Agency Formation (LAFCO)	Board Member
Monterey County First 5	Board Member
Monterey Salinas Transit (MST)	Alternate Board Member
Salinas Valley Solid Waste Authority	Alternate Board Member
Mtry Bay Unif. Air Poll.Cont.Dis.	Board Member
Assoc. Mtry Bay Area Gov.-AMBAG	Board Member
Transport. Agency for Mtry Co.-TAMC	Board Member
Children's Council of Monterey	Alternate Board Member
Monterey County Clerk Recorder	Board Member
Carmel Valley County Sanitation Dist	Board Member
Monterey County Redevelopment Agency	Board Member
Moss Landing County Sanitation Dist.	Board Member
Boronda County Sanitation District	Board Member
Pajaro County Sanitation District	Board Member
Monterey County Water ResourceAgency	Board Member

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
Salinas, Simon

► STREET ADDRESS OR PRECISE LOCATION
629 Argentine Place
CITY
Salinas CA 93905

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 _____ DISPOSED _____

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Rental _____
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.
Mr. & Mrs. Francisco Alvarez

► STREET ADDRESS OR PRECISE LOCATION
806 Howe Drive
CITY
Salinas CA 93907

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 _____ DISPOSED _____

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Rental _____
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.
Kathy Salinas

* 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 B
Interests in Real Property
 (Including Rental Income)

Name
Salinas, Simon

▶ STREET ADDRESS OR PRECISE LOCATION
1005 North Ohio Ave.
 CITY
Weslaco TX 98596

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 _____ DISPOSED _____

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Rental _____
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.
Cele Salinas

▶ STREET ADDRESS OR PRECISE LOCATION

 CITY

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 _____ 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.

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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
Salinas, Simon

▶ NAME OF SOURCE
Pebble Beach Concours d' Elegance
ADDRESS (Business Address Acceptable)
200 Clock Tower Pl., Ste. 205-A
Carmel CA 93923
BUSINESS ACTIVITY, IF ANY, OF SOURCE

Annual Event

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08/15/10</u>	<u>\$ 150.00</u>	<u>Entrance and Parking Tickets</u>
<u>08/15/10</u>	<u>\$ 150.00</u>	<u>Entrance ticket</u>
<u> / / </u>	<u> \$ </u>	<u> </u>

▶ NAME OF SOURCE
Laguna Seca Moto Raceway
ADDRESS (Business Address Acceptable)
1021 Monterey Salinas Hwy
Salinas CA 93908
BUSINESS ACTIVITY, IF ANY, OF SOURCE

Red Bull GrandPrix Annual Event

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07/25/10</u>	<u>\$ 60.00</u>	<u>Ticket for Parking & Entrance</u>
<u>07/25/10</u>	<u>\$ 60.00</u>	<u>Entrance ticket</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

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

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

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: _____