

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION

COVER PAGE

Rec'd
1/25/11
County
Counsel

FEB 01 2011

CO. CLERK ADMINISTRATION

Please type or print in ink

NAME OF FILER (LAST) Duran (FIRST) Jack (MIDDLE)

1. Office, Agency, or Court

Agency Name

Placer County Board of Supervisors
Division, Board, Department, District, if applicable

Supervisor District 1
Your Position

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

Agency: See Attached List

Position: See Attached List

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

- State Judge (Statewide Jurisdiction)
- Multi-County _____ County of Placer
- 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 1 / 1 / 11
- 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.
- 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
- 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



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

Date Signed 1/25/2011
(month, day, year)

Signature

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
 Jack Duran

▶ 1. BUSINESS ENTITY OR TRUST

Duran Law Office
 Name
 4010 Foothills Blvd. Suite 103 N.98
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
 Law Office

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000 3 / 1 / 07
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

NATURE OF INVESTMENT
 Sole Proprietorship Partnership Other

YOUR BUSINESS POSITION 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.)

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

Check one box:
 INVESTMENT REAL PROPERTY

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

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
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

Comments: _____

▶ 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
 \$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)

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 \$500 - \$1,000 OVER \$100,000
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 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE
 Kaiser Permanente Roseville
 ADDRESS (Business Address Acceptable)
 Medical Services
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / / 10	\$ 195.00	Ticket & Lunch
/ /	\$	
/ /	\$	

▶ 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: _____

Jack Duran
Placer County Supervisor, District 1

700 FILING: COMPLETE COMMITTEE & COMMISSIONS LIST 2011

Committee	Status
CITY-COUNTY COMMITTEE FOR REGIONAL DEVELOPMENT ISSUES	Member
- COUNTY AUDIT COMMITTEE	Member
CRIMINAL JUSTICE POLICY COMMITTEE	Member
CSAC/BOARD OF DIRECTORS	Alternate
- FLOOD CONTROL & WATER CONSERVATION DISTRICT BOARD OF DIRECTORS	Member
GREENPRINT STEERING COMMITTEE	Member
- HIGHWAY 65 JOINT POWERS AUTHORITY	Alternate
- *LOCAL AGENCY FORMATION COMMISSION (LAFCO)	Alternate
NATIONAL ASSOCIATION OF COUNTIES (NACO)	Member
NATIONAL ASSOCIATION OF COUNTIES (NACO) - WESTERN INTERSTATE REGION	Member
- PLACER COUNTY TRANSPORTATION PLANNING AGENCY (PCTPA)	Alternate
PLACER COUNTY WATER RESOURCE COUNCIL	Alternate
PLACER PARKWAY POLICY ADVISORY COMMITTEE	Member
SACRAMENTO AREA COMMERCE & TRADE ORGANIZATION (S.A.C.T.O.)	Alternate
SACRAMENTO AREA COUNCIL OF GOVERNMENTS (S.C.O.G.)	Alternate
SACRAMENTO AREA COUNCIL OF GOVERNMENTS CAPITAL VALLEY REGIONAL SERVICE AUTHORITY	Alternate
SIERRA-SACRAMENTO VALLEY EMERGENCY MEDICAL SERVICES AGENCY (EMS)	Alternate
- *SOUTH PLACER REGIONAL TRANSPORTATION AUTHORITY - JPA	Alternate
*SUB-COMMITTEE: POLICY ADVISORY COMMITTEE	Member
- SOUTH PLACER REGIONAL WASTEWATER AUTHORITY - JPA	Member
VETERANS MEMORIAL HALL BOARD: ROSEVILLE BOARD	Member
- *WESTERN PLACER WASTE MANAGEMENT AUTHORITY	Member

*Indicates Placer County Elections Office as holder of the committee 700 forms.