

GP FILED

STATEMENT OF ECONOMIC INTERESTS  
COUNTY OF SACRAMENTO  
BOARD OF SUPERVISORS  
COVER PAGE

Date Received  
*Official Use Only*

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Please type or print in ink.

By \_\_\_\_\_ (d)(5) \_\_\_\_\_  
NAME OF FILER (LAST) DEPUTY (FIRST) (MIDDLE)  
Peters (McCuen) Susan

1. Office, Agency, or Court

Agency Name  
Sacramento County Board of Supervisors, District Three, County Supervisor  
Division, Board, Department, District, if applicable Your Position

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

Agency: See attached Position: \_\_\_\_\_

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

State  Judge (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of Sacramento  
 City of \_\_\_\_\_  Other \_\_\_\_\_

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

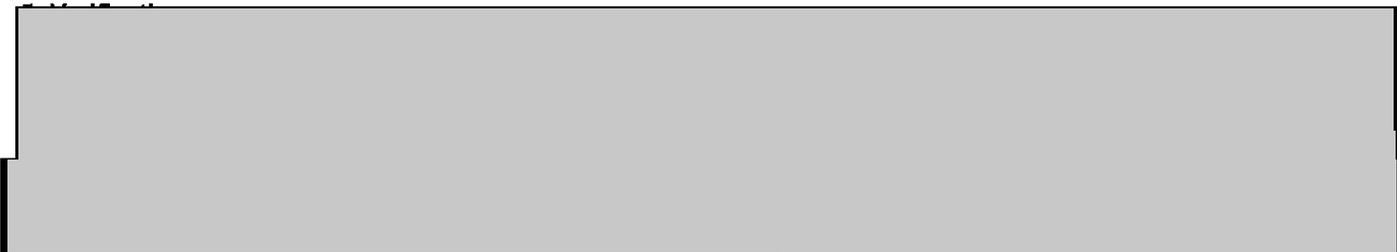
Annual: The period covered is January 1, 2010, through December 31, 2010.  
-or-  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2010.  
 Assuming Office: Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_  
 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.

2011 MAR - 9 AM 9:29  
RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION

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  
-or-  
 None - No reportable interests on any schedule

► Total number of pages including this cover page: 9



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

Date Signed Feb 23 2011  
(month, day, year)

Signature

## Form 700 Statement of Economic Interests

## Other Agencies Covered in Expanded Statement

AGENCY
*Adult and Aging Commission
➤ Area 4 Agency on Aging – Multi-County (Yolo, Yuba, Sacramento, Sierra, Placer, Sutter, Nevada Counties)
*California State Association of Counties
➤ County of Sacramento
*Criminal Justice Cabinet
*National Association of Counties
*Northern California World Trade Center Board
➤ Regional Human Rights/Fair Housing Comm. Governing Board
➤ SACOG (Sacramento Area Council of Government) – Multi-County (El Dorado, Placer, Sacramento, Sutter, Yolo, Yuba)
➤ SACOG's Capitol Valley Regional SAFE – Multi-County (El Dorado, Placer, Sacramento, Sutter, Yolo, Yuba)
➤ SAFCA (Sacramento Area Flood Control Agency) - Multi-County (Sacramento, Sutter, City of Sacramento)
*Sacramento County Disaster Commission
*Sacramento County Water Agency
➤ Sacramento LAFCO (Local Agency Formation Commission)
➤ Sacramento Metro. Air Quality Management
➤ Sacramento Metro. Cable Commission
*Sacramento-Mother Lode Regional Assn. of County Supervisors
➤ Sacramento Public Library Authority
➤ *Sacramento Regional Arts Facilities Financing
➤ Sacramento Area Sewer District (formerly Co. Sanitation Dist. No. 1)
➤ Sacramento Regional County Sanitation District
➤ Sacramento Regional Solid Waste Authority
➤ Sacramento Transportation Authority
➤ Sacramento Abandoned Vehicle Svc. Auth.
*Tobacco Securitization Authority of Northern California
*Tobacco Securitization Authority of Southern California
*Tobacco Securitization Corporation

*\*may not require Form 700*

➤ *Financial Disclosure due by April*

# 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

Susan Peters (McCuen)

▶ NAME OF BUSINESS ENTITY  
Golden Pacific Bancorp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
bank holding company

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 \_\_\_\_\_ (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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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 \_\_\_\_\_ (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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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 \_\_\_\_\_ (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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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 \_\_\_\_\_ (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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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 \_\_\_\_\_ (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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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 \_\_\_\_\_ (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  
Susan Peters (McCuen)

**▶ 1. BUSINESS ENTITY OR TRUST**

McCuen American River Drive Partners, LP

Name  
3610 American River Dr., Ste. 100, Sacramento, 95864

Address (Business Address Acceptable)

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Office Building, Ltd. Partnership

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

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

NATURE OF INVESTMENT  
 Sole Proprietorship     Partnership     \_\_\_\_\_ Other

YOUR BUSINESS POSITION Ltd. Partner

**▶ 1. BUSINESS ENTITY OR TRUST**

McCuen American River Drive Investors, LP

Name  
3610 American River Dr., Ste. 100, Sacramento, 95864

Address (Business Address Acceptable)

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Office Building, Ltd. Partnership

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

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

NATURE OF INVESTMENT  
 Sole Proprietorship     Partnership     \_\_\_\_\_ Other

YOUR BUSINESS POSITION Ltd. Partner

**▶ 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

**▶ 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.)**

See attachment

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

See attachment

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

Check one box:  
 INVESTMENT                       REAL PROPERTY

3636 American River Dr. Sacramento, 95864

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

Office Building

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

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

Check one box:  
 INVESTMENT                       REAL PROPERTY

3636 American River Dr. Sacramento, 95864

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

Office Building

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                      \_\_\_\_\_ / \_\_\_\_ / 10  
 \$10,001 - \$100,000                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 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: \_\_\_\_\_

Form 700

Susan Peters (McCuen)

February 23, 2011

Schedule A-2

McCuen American River Drive Investors, LP and McCuen American  
River Drive Partners, LP

Interwest Insurance Services

John O. Bronson

Matheny, Linkert, Sears and Long

William L. Lyon and Associates

U. S. AgBank



**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  
Susan Peters (McCuen)

**▶ 1. BUSINESS ENTITY OR TRUST**

Plaza del Paso Partners, LP  
 Name  
3610 American River Dr., Ste. 100, Sacramento, 95864  
 Address (Business Address Acceptable)  
 Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Office Building, Ltd. Partnership

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

NATURE OF INVESTMENT  
 Sole Proprietorship     Partnership     \_\_\_\_\_ Other

YOUR BUSINESS POSITION Ltd. Partner

**▶ 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                      \_\_\_\_\_/\_\_\_\_\_/10  
 \$10,001 - \$100,000                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 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

**▶ 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.)**

Sacramento Employment Training Agency  
Dept. of Health & Human Services

**▶ 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

925 Del Paso Blvd., Sacramento  
 Name of Business Entity or  
 Street Address or Assessor's Parcel Number of Real Property

Office Building  
 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                      \_\_\_\_\_/\_\_\_\_\_/10  
 \$10,001 - \$100,000                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 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

**▶ 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                      \_\_\_\_\_/\_\_\_\_\_/10  
 \$10,001 - \$100,000                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 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: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
Susan Peters (McCuen)

▶ NAME OF SOURCE  
North State Business Industry Association  
 ADDRESS (Business Address Acceptable)  
1536 Eureka Road, Roseville, CA 95661  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Development Industry

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1 / 15 / 10</u>	<u>\$ 75.00</u>	<u>Installation Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Sacramento Area Council of Governments  
 ADDRESS (Business Address Acceptable)  
1415 L Street, Ste. 300, Sacramento 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Transportation Planning

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>8 / 27 / 10</u>	<u>\$ 65.00</u>	<u>State of the Region</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
McCuen Properties  
 ADDRESS (Business Address Acceptable)  
3610 American River Dr., Ste. 100, Sac., 95864  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Land Development & Property Management

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2 / 5 / 10</u>	<u>\$ 155.00</u>	<u>Awards Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Nat'l Assoc. for the Advancement of Colored People  
 ADDRESS (Business Address Acceptable)  
PO Box 188231, Sacramento, CA 95818  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Civil Rights

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9 / 4 / 10</u>	<u>\$ 60.00</u>	<u>2 tkts - R&amp;B Festival</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
GenCorp  
 ADDRESS (Business Address Acceptable)  
PO Box 537012, Sacramento, 95853-7012  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Aerospace and Real Estate Development

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4 / 28 / 10</u>	<u>\$ 65.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Sac. Area Emergency Housing Center  
 ADDRESS (Business Address Acceptable)  
2411 Alhambra Blvd., Suite 110, Sacramento 95817  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Housing and Support Services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9 / 10 / 10</u>	<u>\$ 100.00</u>	<u>2 tkts - Fundraiser</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

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

**SCHEDULE D**  
**Income – Gifts**

Name  
 Susan Peters (McCuen)

▶ NAME OF SOURCE  
 Sacramento Recycling & Transfer Station

ADDRESS (Business Address Acceptable)  
 8491 Fruitridge Road, Sacramento 95826

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Recycling

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 15 / 10	\$ 89.95	Holiday gift basket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: \_\_\_\_\_