

RECEIVED  
Date Received  
Official Use Only  
MAR 30 2011  
By

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Weygandt Robert M.

1. Office, Agency, or Court

Agency Name  
Placer County  
Division, Board, Department, District, if applicable  
Board of Supervisors  
Your Position  
Supervisor District Two

▶ 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 \_\_\_\_\_  
 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: 7  
 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

RECEIVED  
MAR 30 2011

heroin 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 3/25/2011  
(month, day, year) Signature

## 2010 DISTRICT TWO COMMISSIONS MTGS--SUPERVISOR ROBERT WEYGANDT

- o Air Pollution Control District Board (Member)
- o American River Authority ARA (Alternate)
- o City-County Committee for Regional Development Issues (Member)
- o Economic Development Board (Member)
- o Flood Control & Water Conservation District Board of Directors (Member)
- o Highway 65 Joint Powers Authority (Member)
- o Investment Oversight Committee-Treasurer/Tax Collector (Member)
- o Local Agency Formation Commission (LAFCO) (Member)
- o Middle Fork Project Finance Authority (Member)
- o Mountain Counties Air Basin (MCAB) (Alternate)
- o Placer County Indian Gaming Local Community Benefit (Member)
- o Placer County Trans Planning Agency Countywide Steering (Member)
- o Placer-Nevada Wastewater Authority (Member)
- o Placer Parkway Policy Advisory Committee (Member)
- o Sacramento Valley Air Pollution Control Council (Alternate)
- o South Placer Regional Wastewater Authority-JPA (Member)
- o Tribal County Advisory Committee (Member)
- o Veterans Memorial Hall Board – Lincoln (Member)
- o Water Resources & Energy Committee (Member)
- o Western Placer Waste Management Authority (Member)

**SCHEDULE A-1  
Investments**

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

*Do not attach brokerage or financial statements.*

Name

Robert M. Weygandt

▶ NAME OF BUSINESS ENTITY  
Freedom Aviation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Aircraft Parts Repair

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:  
6 / 1 / 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 B**  
**Interests in Real Property**  
 (Including Rental Income)

Name  
Robert M. Weygandt

► STREET ADDRESS OR PRECISE LOCATION  
1020 Airport Rd & 1501 Aviation Blvd  
 CITY  
Lincoln, CA 95648

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:  
 / / 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.  
Freedom Aero Service & General Dynamics Co.

► STREET ADDRESS OR PRECISE LOCATION  
1217 Pleasant Grove Blvd  
 CITY  
Roseville, CA 95678

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 / 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.  
BK Seeger Corp, Blue Oaks Appraisals, Centerpoint Engineering & Win Financials

\* 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\*  
Westamerica Bank  
 ADDRESS (Business Address Acceptable)  
1375 Exposition Blvd #100, Sacramento CA 95815  
 BUSINESS ACTIVITY, IF ANY, OF LENDER  
Financial Institution

INTEREST RATE TERM (Months/Years)  
7.75 %  None 25 year

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\*  
Community 1st Bank  
 ADDRESS (Business Address Acceptable)  
2250 Douglas Blvd, Suite 190, Roseville CA 95661  
 BUSINESS ACTIVITY, IF ANY, OF LENDER  
Financial Institution

INTEREST RATE TERM (Months/Years)  
6.95 %  None 25 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 D**  
**Income – Gifts**

Name  
 Robert M. Weygandt

▶ NAME OF SOURCE  
 Holland & Knight

ADDRESS (Business Address Acceptable)  
 2099 Pennsylvania Ave NW #100, Washington DC

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Law-Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2 / 2 / 10	\$ 70.00	Dinner
/ /	\$	
/ /	\$	

▶ 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: \_\_\_\_\_