

AT/AN 2012

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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Date Received Official Use Only



RECEIVED FAIR POLITICAL PRACTICES COMMISSION

Please type or print in ink.

NAME OF FILER (LAST) Elizabeth (FIRST) Jane 2014 MAR 26 PM 1:55 (MIDDLE)

1. Office, Agency, or Court

Agency Name

City of Los Banos

Council Member

Division, Board, Department, District, if applicable

Your Position

City Council

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

Agency: Position:

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

- State, Multi-County, City of Los Banos, Judge or Court Commissioner, County of, Other

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

- Annual: The period covered is January 1, 2012, through December 31, 2012. Leaving Office: Date Left. Assuming Office: Date assumed. Candidates: Election Year and office sought.

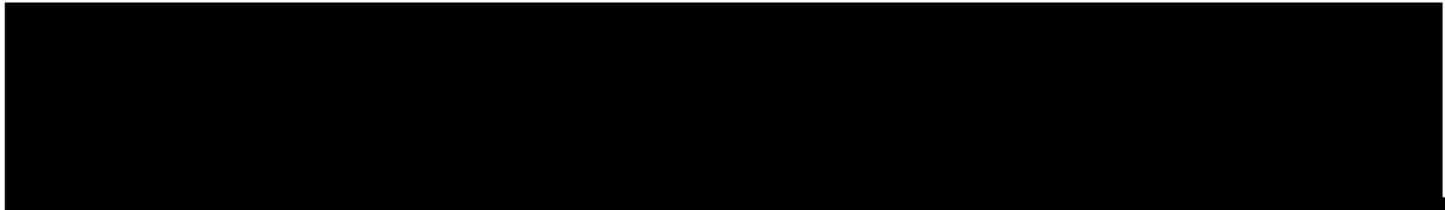
4. Schedule Summary

Check applicable schedules or "None."

Total number of pages including this cover page: 5

- Schedule A-1, A-2, B, C, D, E, None - No reportable interests on any schedule

5. Verification



herein and in any attached schedules is true and complete. I acknowledge this is a

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

Date Signed 3/23/14 (month, day, year)

Signature

RECEIVED

Date Received
Official Use Only

FEB 25 2013

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

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FAIR POLITICAL
PRACTICES COMMISSION

CITY OF LOS BANOS

Please type or print in Ink.

NAME OF FILER (LAST) Stonegrove (MIDDLE) Jane
Elizabeth
2013 MAR -4 PM 3:42

1. Office, Agency, or Court

Agency Name

City of Los Banos

Council Member

Division, Board, Department, District, if applicable

Your Position

City Council

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

Agency: _____

Position: _____

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of Los Banos

Other _____

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

Annual: The period covered is January 1, 2012, through December 31, 2012.

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

-or-

The period covered is ____/____/____, through December 31, 2012.

The period covered is January 1, 2012, through the date of leaving office.

Assuming Office: Date assumed ____/____/____

The period covered is ____/____/____, through the date of leaving office.

Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: _____

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

5. Verification

herein and in any attached schedules is true and complete. I acknowledge this is a

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

Date Signed 2/26/13
(month, day, year)

Signature _____

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
Elizabeth Stonegrove

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Los Banos Unified School District

ADDRESS (Business Address Acceptable)
1717 S. 11th Street

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Teaching

YOUR BUSINESS POSITION
Social Science Teacher/Coach

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership
 Sale of _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
CSU Fresno Foundation / CA Dept. Fish & Game

ADDRESS (Business Address Acceptable)
2771 E. Shaw, Fresno, CA 93710

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Biological Monitoring

YOUR BUSINESS POSITION
Scientific Aide

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership
 Sale of _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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 _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

INTEREST RATE _____ % None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor _____
 Other _____
(Describe)

Comments: _____

**SCHEDULE D
Income - Gifts**

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>Elizabeth Stonegrae</u>

▶ NAME OF SOURCE (Not an Acronym)
Brittany Zimmer

ADDRESS (Business Address Acceptable)
2309 Divisadero St., Apt. 4A SF, CA 94115

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Toby Moore

ADDRESS (Business Address Acceptable)
2220 Parker Ave., Caldwell, ID 83605

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>60.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Judy Sipe

ADDRESS (Business Address Acceptable)
5916 Lozano St., Coulterville, CA 95311

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>100.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Josh Ramos

ADDRESS (Business Address Acceptable)
845 S. Ham Ln., Lodi, CA 95242

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Travis Flosi

ADDRESS (Business Address Acceptable)
10200 Bonds Flat Rd. Unit 87 La Grange, CA 95329

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Pete Hernandez

ADDRESS (Business Address Acceptable)
739 Madison Ave., Los Banos, CA 93634

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: _____

SCHEDULE D
Income - Gifts

Name
Elizabeth Stonogrove

▶ NAME OF SOURCE (Not an Acronym)
Donald Toscano

ADDRESS (Business Address Acceptable)
823 Birch Ave., Los Banos, CA 93635

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Jim Orr

ADDRESS (Business Address Acceptable)
716 Aps, Los Banos, CA 93635

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Kerry Gladosky

ADDRESS (Business Address Acceptable)
4409 Nicolet Ave., Stevens Point, WI 54481

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
David Abes

ADDRESS (Business Address Acceptable)
377 Foxmeadow Way, Los Banos, CA 93635

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Dixie Rousar

ADDRESS (Business Address Acceptable)
2199 Randy St, White Bear Lake, MN 55110

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Nancy Pike

ADDRESS (Business Address Acceptable)
556 Dalewood Dr, Orinda, CA 94563

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>250.00</u>	<u>Cash</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: _____

**SCHEDULE D
Income - Gifts**

Name
Elizabeth Stonegrae

▶ NAME OF SOURCE (Not an Acronym)
Dennis Cawthon

ADDRESS (Business Address Acceptable)
315 Autumn Gold Dr, Chico, CA 95973

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>110.00</u>	<u>Cash</u>
	\$	
	\$	

▶ NAME OF SOURCE (Not an Acronym)
Clark Keefe

ADDRESS (Business Address Acceptable)
P.O. Box 1157, Columbia, CA 95310

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wedding Gift

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/23/12</u>	<u>50.00</u>	<u>Cash</u>
	\$	
	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Comments: _____