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BY PAGE 1 of 3  
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**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

**STATEMENT OF ECONOMIC INTERESTS**  
FAIR POLITICAL PRACTICES COMMISSION  
**COVER PAGE**

2013 MAR 19 AM 11:22

Please type or print in ink.

NAME OF FILER (LAST) MAGNUSON (FIRST) George (MIDDLE) Alexander

**1. Office, Agency, or Court**

Agency Name City of Rocklin

Division, Board, Department, District, if applicable Rocklin City Council Your Position Council member

► If filing for multiple positions, list below or on an attachment.  
Agency: Rocklin Public Finance Agency - Director / Board Member  
Successory Agency to Rocklin Redevelopment Agency - Director / Board Member

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

- State
- Multi-County \_\_\_\_\_
- City of Rocklin
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

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

- Annual:** The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is \_\_\_\_\_ through December 31, 2012.
- Assuming Office:** Date assumed \_\_\_\_\_
- Leaving Office:** Date Left \_\_\_\_\_ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- 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: 5
- 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**

**5. Verification**



I certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete.

Date Signed 3/12/13  
(month, day, year)

STATEMENT OF ECONOMIC INTERESTS

Cover Page - 2/3

Date Received  
Official Use Only

RESOLVED  
FAIR POLITICAL  
COVER PAGE  
COMMISSION

Please type or print in ink.

2013 MAR 19 AM 11:22

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
MAGNUSON George Alexander

1. Office, Agency, or Court

Agency Name: WESTER PLACER Waste Management Authority  
Division, Board, Department, District, if applicable: J.P.A.  
Your Position: BOARD Member / Director

► 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 \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other J.P.A.

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

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- The period covered is \_\_\_\_\_ through December 31, 2012.
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- The period covered is \_\_\_\_\_ through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

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- 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

5 [Redacted Signature Area]

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

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

Date Signed 3/12/13  
(month, day, year)

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FAIR POLITICAL  
PRACTICES COMMISSION  
COVER PAGE

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NAME OF FILER (LAST) 2010 MAR 19 11:22 (FIRST) (MIDDLE)  
MAGNUSON GEORGE ALEXANDER

1. Office, Agency, or Court

Agency Name: State of California  
Division, Board, Department, District, if applicable: Department of Housing & Community Development - HCD Reg. II  
Your Position: \_\_\_\_\_

► 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 \_\_\_\_\_  Other \_\_\_\_\_

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

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- or-  
The period covered is \_\_\_\_\_ through December 31, 2012.
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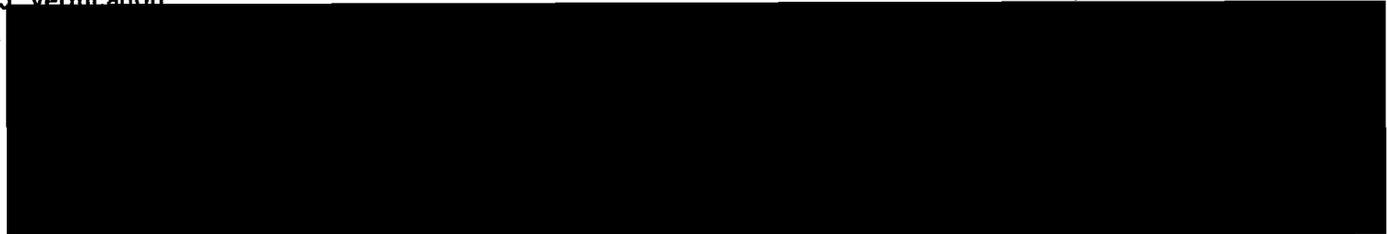
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Check applicable schedules or "None."

► Total number of pages including this cover page: 5

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5. Verification



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

Date Signed 3/12/13  
(month, day, year)

**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

*George Alexander Magnuson*

▶ NAME OF BUSINESS ENTITY  
Umgua Bank

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
GENERAL BANKING

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:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      3 / 15 / 12  
 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:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
WESTERN LIFE INS Company

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
LIFE INSURANCE

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  
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IF APPLICABLE, LIST DATE:  
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 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

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 ACQUIRED                      DISPOSED

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

