

2012 ANJ

Date Received  
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FEB 20 2013

A PUBLIC DOCUMENT  
2013 FEB 25 AM 9:44



Please type or print in ink.

NAME OF FILER (LAST) Bohn (FIRST) Rex HUMBOLDT COUNTY ELECTORAL DISTRICT H

1. Office, Agency, or Court

Agency Name  
County of Humboldt  
Division, Board, Department, District, if applicable Board of Supervisors  
Your Position  
1st District Supervisor

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

Agency: Expanded Statement Attached Position: \_\_\_\_\_

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

State  Judge or Court Commissioner (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of Humboldt  
 City 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: \_\_\_\_\_**  
 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



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

Date Signed 2/19/2013  
(month, day, year)

STATEMENT OF ECONOMIC INTERESTS

RECEIVED  
Date Received  
Official Use Only

FEB 15 2013

HUMBOLDT COUNTY  
ELECTIONS

STATE  
FAIR POLITICAL  
PRACTICES COMMISSION  
COVER PAGE  
2013 FEB 19 PM 1:40



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Bohn Rex H

1. Office, Agency, or Court

Agency Name  
County of Humboldt  
Division, Board, Department, District, if applicable Board of Supervisors  
Your Position 1st District Supervisor

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

Agency: Expanded Statement Attached Position:

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

- State  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of Humboldt
- City 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 \_\_\_\_/\_\_\_\_/\_\_\_\_ (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 01 / 07 / 2013  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

MAILING ADDRESS STREET CITY STATE ZIP CODE

(d)(5)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

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

Date Signed 2-12-13  
(month, day, year)

Signature (d)(5)

**EXPANDED STATEMENT OF ECONOMIC INTERESTS**  
*A Public Document*

Agency: Area Agency on Aging  
Position Title: Member  
Office of Jurisdiction: California Department of Aging  
Type of Statement: Assuming Office Date: January 7, 2013  
 The period covered is January 1, 2012 through December 31, 2012.

Agency: Humboldt County Association of Governments (HCAOG)  
Position: Alternate  
Office of Jurisdiction: Multi-Agency  
Type of Statement: Assuming Office Date: January 7, 2013  
 The period covered is January 1, 2012 through December 31, 2012.

Agency: Caltrans North District External Advisory  
Position Title: Alternate  
Office of Jurisdiction: Multi-Agency  
Type of Statement: Assuming Office Date: January 7, 2013  
 The period covered is January 1, 2012 through December 31, 2012

Agency: Eel/Russian River Joint Powers Commission  
Position Title: Alternate  
Office of Jurisdiction: Multi-Agency: Counties of Humboldt, Lake, Mendocino, and Sonoma  
Type of Statement: Assuming Office Date: January 7, 2013  
 The period covered is January 1, 2012 through December 31, 2012.

Agency: First 5 Humboldt  
Position Title: Alternate  
Office of Jurisdiction: County of Humboldt  
Type of Statement: Assuming Office Date: January 7, 2013  
 The period covered is January 1, 2012 through December 31, 2012.

Agency: Humboldt County Indian Gaming Community Benefit Committee  
Position: Member  
Office of Jurisdiction: Multi-Agency  
Type of Statement: Assuming Office Date: January 7, 2013  
 The period covered is January 1, 2012 through December 31, 2012

Agency: Juvenile Justice Coordinating Council  
Position Title: Member  
Office of Jurisdiction: County of Humboldt  
Type of Statement: Assuming Office Date: January 7, 2013  
 The period covered is January 1, 2012 through December 31, 2012.

Agency: Juvenile Justice Delinquency Prevention  
Position Title: Member  
Office of Jurisdiction: County of Humboldt  
Type of Statement: Assuming Office Date: January 7, 2013  
 The period covered is January 1, 2012 through December 31, 2012.

**EXPANDED STATEMENT OF ECONOMIC INTERESTS**  
*A Public Document*

Agency: Behaviorl Health Board  
Position Title: Alternate  
Office of Jurisdiction: County of Humboldt  
Type of Statement: Assuming Office Date: January 7, 2013  
 [ X ] The period covered is January 1, 2012 through December 31, 2012.

Agency: Humboldt Transit Authority  
Position Title: Member  
Office of Jurisdiction: County of Humboldt  
Type of Statement: Assuming Office Date: January 7, 2013  
 [X] The period covered is January 1, 2012 through December 31, 2012.

Agency: Waste Management Authority  
Position Title: 1<sup>st</sup> Alternate  
Office of Jurisdiction: Multi-Agency  
Type of Statement: Assuming Office Date: January 7, 2013  
 [X] The period covered is January 1, 2012 through December 31, 2012.

Agency: Work Force Investment Board  
Position Title: Alternate  
Office of Jurisdiction: County of Humboldt  
Type of Statement: Assuming Office Date: January 7, 2013  
 [X] The period covered is January 1, 2012 through December 31, 2012.

**SCHEDULE A-1  
Investments**

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

*Do not attach brokerage or financial statements.*

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Bohn, Rex</u>
---

▶ NAME OF BUSINESS ENTITY  
Intel

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  
Umpqua Holding

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  
CGM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
IRA

---

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  
Cisco Systems

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
IR

---

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  
General Electric

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
IRA

---

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  
Intel

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
IRA

---

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

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

**SCHEDULE A-1  
Investments**

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

*Do not attach brokerage or financial statements.*

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Bohn, Rex</u>
---

▶ NAME OF BUSINESS ENTITY  
Royal Dutch Shell

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  
US Steel

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  
I Shares - Japan Index Fund

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  
Ivy Strategy Fund

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  
MFS Global Fund

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  
Wells Fargo Advantage Fund

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

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

# 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

Bohn, Rex

▶ NAME OF BUSINESS ENTITY  
Bank of America

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  
Met Life

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

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

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

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

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

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



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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
 Bohn, Rex

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
 County of Humboldt

ADDRESS (Business Address Acceptable)  
 825 5th Street, Room #111, Eureka, CA 95501

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Government

YOUR BUSINESS POSITION

---

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  
 Cloneys Pharmacy

ADDRESS (Business Address Acceptable)  
 2515 Harrison Avenue, Eureka, CA 95503

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Retail Pharmacy

YOUR BUSINESS POSITION

---

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      TERM (Months/Years)

\_\_\_\_\_ %     None      \_\_\_\_\_

SECURITY FOR LOAN

None       Personal residence

Real Property \_\_\_\_\_  
 Street address

\_\_\_\_\_ City

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
 (Describe)

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