

COVER PAGE

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FAIR POLITICAL
PRACTICES COMMISSION
2013 FEB 12 AM 11:35

JAN 22 2013

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) **KEITH W. WILLIAMS**
Carrier **John** **MARIPOSA COUNTY CLERK**

1. Office, Agency, or Court

Agency Name **Meriposa County Board of Supervisors**
Division, Board, Department, District, If applicable **District 5**
Your Position **Supervisor**

Kathryn M. Friedman
KATHRYN M. FRIEDMAN
Deputy County Clerk

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

Agency: N/A Position: _____

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

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of **MARIPOSA**
- 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 01 / 07 / 2013
- 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. [Redacted area]

I have taken all reasonable steps in preparing this statement. I have reviewed this 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 01/21/2013 Signature _____
(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

Carrier, John F.

▶ **NAME OF BUSINESS ENTITY**
Berkshire Hathaway

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Insurance, Candy, Furniture

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**
Edison International

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Electricity

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 Company

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Power

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**
Home Depot, Inc

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Home Improvement Retail Store

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**
Johnson & Johnson

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Healthcare products

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**
Pepsico Inc

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Beverages

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.

Name
Carrier, John F.

▶ NAME OF BUSINESS ENTITY
Pfizer Incorporated

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Healthcare Products

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
Wal-mart Stores, Inc

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retail

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
Pinnacle West Capital

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Electricity

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
Procter & Gamble

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Healthcare Products

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
Anglo American

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Diamonds

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
Coca Cola Company

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Beverages

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

Carrier, John F.

▶ NAME OF BUSINESS ENTITY
Merck & Co, Inc

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Pharmaceuticals

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
Microsoft Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computers, Software

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
Qualcomm, Inc

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Communications

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
Sempra Energy

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Electricity

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 B
Interests in Real Property
(Including Rental Income)

Name

Carrier, John F.

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
015-280-0130

CITY
Mariposa

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	____/____/12	____/____/12
<input checked="" type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

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.
 None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	____/____/12	____/____/12
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

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.
 None

* 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*
N/A

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE	TERM (Months/Years)
_____ % <input type="checkbox"/> None	_____

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*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE	TERM (Months/Years)
_____ % <input type="checkbox"/> None	_____

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

Guarantor, if applicable

Comments: _____