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CALAVERAS COUNTY
Madaline Kraska, County Clerk
[Signature], Deputy

STATEMENT OF ECONOMIC INTERESTS

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

Please type or print in ink.

GP

NAME OF FILER (LAST) Wright (FIRST) Christopher (MIDDLE) K
2013 APR -4 PM 12:00

1. Office, Agency, or Court

Agency Name Calaveras County Board of Supervisors Your Position District 2 Supervisor
Division, Board, Department, District, if applicable

► 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 Calaveras
- 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 1/8/2013
- 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: 8

- 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



I have used all reasonable diligence in preparing this statement. I know the information herein and in any attached schedules is true and complete. I acknowledge and certify under penalty of perjury under the laws of the State of California that the information provided is true and correct.

Date Signed Chris Wright 2/1/13
(month, day, year)

(File the originally signed statement with your filing official.)

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name _____

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
17144 Hwy 26

CITY
Glencoe CA 95232

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:
 _____/_____/12 _____/_____/12
 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.
 None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

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:
 _____/_____/12 _____/_____/12
 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.
 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* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE _____% None TERM (Months/Years) _____

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 _____% None TERM (Months/Years) _____

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

Comments: _____

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name _____

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Carol Phelps

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Landscape Consultant

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
Foothill Community

ADDRESS (Business Address Acceptable)
Non-Profit

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Executive Director

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*
Carol Phelps

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)

3 % None 6 years

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor _____
 Other _____
(Describe)

Comments: _____

SCHEDULE D
Income - Gifts

▶ NAME OF SOURCE (Not an Acronym)
Jim Pesout
 ADDRESS (Business Address Acceptable)
4564 Railroad Flat Rd, RR Flat, 95248
 BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Trevor Pesout
 ADDRESS (Business Address Acceptable)
4564 RR Flat Rd, RR Flat 95248
 BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Sarah Pesout
 ADDRESS (Business Address Acceptable)
4564 RR Flat Rd, RR Flat 95248
 BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Sally Tuttle
 ADDRESS (Business Address Acceptable)
9494 Hwy 26, Miller Hill, 95245
 BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 100</u>	<u>Check</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Holly Rich Mines
 ADDRESS (Business Address Acceptable)
2149 RR Flat Rd, CA 95248
 BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 420</u>	<u>Check</u>
<u>1/12</u>	<u>\$ 420</u>	<u>Check</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Aileen Schlenker
 ADDRESS (Business Address Acceptable)
8964 Lakeside Dr, Mt Lanza
 BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

Comments: _____

SCHEDULE D
Income - Gifts

Name _____

▶ NAME OF SOURCE (Not an Acronym)
Dominique Gartner
 ADDRESS (Business Address Acceptable)
9550 Sun Rd Mt. Ranch CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
David Richter
 ADDRESS (Business Address Acceptable)
9550 Sun Rd, Mt. Ranch CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Michael Dondoro
 ADDRESS (Business Address Acceptable)
635 Hereditz Rd, RR Flat CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Kimberly Grissom
 ADDRESS (Business Address Acceptable)
635 Hereditz Rd, RR Flat CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Diane Krutledge
 ADDRESS (Business Address Acceptable)
6560 Guna Sta. Valley Springs CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Barbara & Dick Dowell
 ADDRESS (Business Address Acceptable)
4249 Blue Mt. Rd, W. Bayville CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$ 400</u>	<u>Check</u>
<u> / / </u>	<u>\$</u>	<u> </u>

Comments: _____

SCHEDULE D
Income - Gifts

▶ NAME OF SOURCE (Not an Acronym)
Susan Garriguas & John Garriguas
 ADDRESS (Business Address Acceptable)
3317 Golden Gate Rd - #5, Studio City, CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/12	\$ 400	Gift ^{Check} donation
1/12	\$ 400	Gift ^{Check} donation
1/1	\$	
1/1	\$	

▶ NAME OF SOURCE (Not an Acronym)
Ron Morrison
 ADDRESS (Business Address Acceptable)
1457 Fisker Rd, SF CA 94114
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/12	\$ 420	Gift ^{Check} donation
1/1	\$	
1/1	\$	

▶ NAME OF SOURCE (Not an Acronym)
Lupe Mires
 ADDRESS (Business Address Acceptable)
136 Logan Str. #7, LA, CA 90026
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/12	\$ 420	Gift ^{Check} donation
1/1	\$	
1/1	\$	

▶ NAME OF SOURCE (Not an Acronym)
Lupe Mires
 ADDRESS (Business Address Acceptable)
11647 Blix St, Apt 8, N Hollywood CA 91602
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/12	\$ 420	Gift ^{Check} donation
1/1	\$	
1/1	\$	

▶ NAME OF SOURCE (Not an Acronym)
Suzie Russin
 ADDRESS (Business Address Acceptable)
9390 Lakeside Dr, Mtn View, CA 95246
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/12	\$ 420	Gift Check
1/1	\$	
1/1	\$	

▶ NAME OF SOURCE (Not an Acronym)
Tim Laddish
 ADDRESS (Business Address Acceptable)
15656 Foothill Rd, Sheep Ranch 95250
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/12	\$ 420	Gift Check
1/1	\$	
1/1	\$	

Comments: _____

SCHEDULE D
Income - Gifts

Name _____

▶ NAME OF SOURCE (Not an Acronym)
Marty Martin

ADDRESS (Business Address Acceptable)
~~3263~~ 3263 Judya Ln, Lafayette CA 94549

BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Bette Valletta

ADDRESS (Business Address Acceptable)
6660 N. Flat Rd, Mt Rancho

BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 100</u>	<u>check</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Thomas Dandera

ADDRESS (Business Address Acceptable)
636 Horrodate Pl, RR 95248

BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Jason Givens

ADDRESS (Business Address Acceptable)
71 N. Flat Rd, RR Flat CA 95248

BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Carol Phelps

ADDRESS (Business Address Acceptable)
8909 Lakeside Dr, Mt. Rancho

BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 420</u>	<u>Check</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Leanne Bryan

ADDRESS (Business Address Acceptable)
7475 Old Emigrant Trw, Mt Rancho

BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 420</u>	<u>Check</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

Comments: _____

SCHEDULE D
Income - Gifts

Name _____

▶ NAME OF SOURCE (Not an Acronym)
Marlene M. Glensy & Kevin Melby
 ADDRESS (Business Address Acceptable)
1311 N Raymond Ave; Fullerton CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 420</u>	<u>Check</u>
<u>1/12</u>	<u>\$ 420</u>	<u>Check</u>
<u>1/1</u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Laorie Webb
 ADDRESS (Business Address Acceptable)
16880 Rambo Canyon Rd, Sutter Creek CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 250</u>	<u>Check</u>
<u>1/1</u>	<u>\$</u>	<u></u>
<u>1/1</u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Michael Zerk
 ADDRESS (Business Address Acceptable)
7047 Exeter Dr. Oakland CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 65</u>	<u>Check</u>
<u>1/1</u>	<u>\$</u>	<u></u>
<u>1/1</u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Ann Pesout
 ADDRESS (Business Address Acceptable)
4564 RR Flat, RR Flat CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 400</u>	<u>Check</u>
<u>1/1</u>	<u>\$</u>	<u></u>
<u>1/1</u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Jane Handertmark
 ADDRESS (Business Address Acceptable)
102 Bank St. SF CA 94110
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/12</u>	<u>\$ 470</u>	<u>Check</u>
<u>1/1</u>	<u>\$</u>	<u></u>
<u>1/1</u>	<u>\$</u>	<u></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)
<u>1/1</u>	<u>\$</u>	<u></u>
<u>1/1</u>	<u>\$</u>	<u></u>
<u>1/1</u>	<u>\$</u>	<u></u>

Comments: _____