

GCC

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**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

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

MAR 05 2013

CO. CLERK ADMINISTRATION



Please type or print in ink.

2013 MAR - 7 AM 11:51

NAME OF FILER (LAST) Duran (FIRST) Jack (MIDDLE)

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

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

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

Agency: See attached List Position: Board Member/Alternate

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

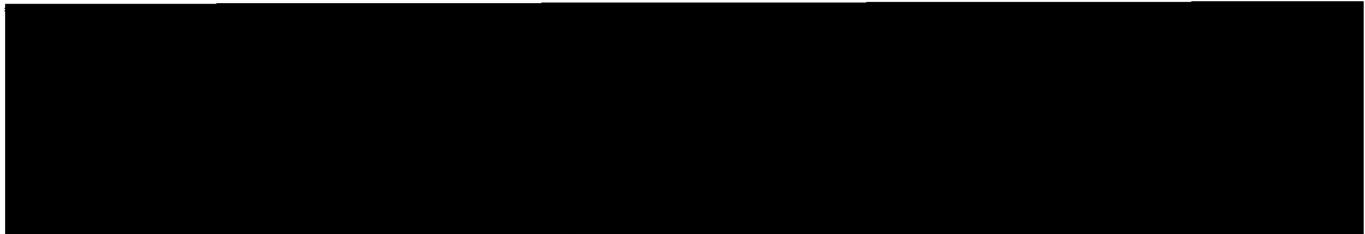
- State
- Multi-County
- City of See attached List
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of Placer
- Other

**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 \_\_\_\_\_
- Candidate:** Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_
- 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.

**4. Schedule Summary**

- Check applicable schedules or "None." ► Total number of pages including this cover page: \_\_\_\_\_
- 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**



herein and in any attached schedules is true and complete. I acknowledge that I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/25/13  
(month, day, year)

LIST OF BOARDS AND COMMISSION AND POSITION FOR

Jack Duran 2012

700 Forms

- City-County Committee for Regional Development Issues - **Board Member**  Annual  Assuming  Leaving
- ✓ County Audit Committee - **Board Member**  Annual  Assuming  Leaving
- Criminal Justice Policy Committee – **Board Member**  Annual  Assuming  Leaving
- CSAC Board of Directors – **Alternate**  Annual  Assuming  Leaving
- ✓ Flood Control & Water Conservation Board Of Directors – **Board Member**  Annual  Assuming  Leaving
- Greenprint Steering Committee - **Board Member**  Annual  Assuming  Leaving
- Highway 65 Joint Powers Authority **Alternate**  Annual  Assuming  Leaving
- \*Local Agency Formation Commission (LAFCO) **Alternate**  Annual  Assuming  Leaving
- National Association of Counties (NACO) – **Board Member**  Annual  Assuming  Leaving
- National Association of Counties (NACO) Western Interstate Region – **Board Member**  Annual  Assuming  Leaving
- \*Oversight Board of the Successor Agency Of the former Redevelopment Agency of the City of Roseville – **Board Member**  Annual  Assuming  Leaving
- ✓ Placer County Transportation Planning Agency (PCTPA) – **Alternate**  Annual  Assuming  Leaving
- Placer County Water Resource Council **Alternate**  Annual  Assuming  Leaving
- Placer Parkway Policy Advisory Committee **Board Member**  Annual  Assuming  Leaving
- Sacramento Area Commerce & Trade Organization (S.A.C.T.O.) - **Alternate**  Annual  Assuming  Leaving
- GP** Sacramento Area Council of Governments (S.C.O.G.) **Board Member**  Annual  Assuming  Leaving
- GP** Sacramento Area Council of Governments Capital Valley Regional Service Authority – **Alternate**  Annual  Assuming  Leaving
- Sierra-Sacramento Valley Emergency Medical Services Agency (EMS) – **Alternate**  Annual  Assuming  Leaving
- \*South Placer Regional Transportation Authority (JPA) **Alternate**  Annual  Assuming  Leaving

LIST OF BOARDS AND COMMISSION AND POSITION FOR

**Jack Duran 2012**

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\*Sub-Committee: Policy Advisory Committee

**Board Member**

Annual  Assuming  Leaving

South Placer Regional Wastewater Authority - JPA

**Board Member**

Annual  Assuming  Leaving

Veterans Memorial Hall Board – Roseville

**Board Member**

Annual  Assuming  Leaving

\*Western Placer Waste Management Authority

**Board Member**

Annual  Assuming  Leaving

*\*Indicates Placer County Elections Office is Holder of the committee 700 Forms*



**SCHEDULE D**  
**Income - Gifts**

Name  
 Jack Duran

▶ NAME OF SOURCE (Not an Acronym)  
 Kaiser Permanente

ADDRESS (Business Address Acceptable)  
 1650 Response Road, Sacramento, CA 95815

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Roseville Chamber Event

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 08 / 12	\$ 120	Splash 2012 Tickets
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)  
 UAIC

ADDRESS (Business Address Acceptable)  
 10772 Indian Hill Road, Auburn, CA 95603

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Tribal Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 15 / 12	\$ 75	Ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)  
 Al Johnson

ADDRESS (Business Address Acceptable)  
 1770 Eureka Road, Ste 110, Roseville, CA 95661

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Consultant

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 15 / 12	\$ 75	Ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: \_\_\_\_\_