

ID - 96186631 87200

Please type or print in ink.

2013 APR -5 PM 12:08



NAME OF FILER (LAST) (FIRST) (MIDDLE)
Gonzales, Josie

1. Office, Agency, or Court

Agency Name

County of San Bernardino

Division, Board, Department, District, if applicable

Your Position

Board Of Supervisors

Elective Board of Supervisors

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

Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS Position: _____

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

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of San Bernardino
- City of _____ Other _____

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

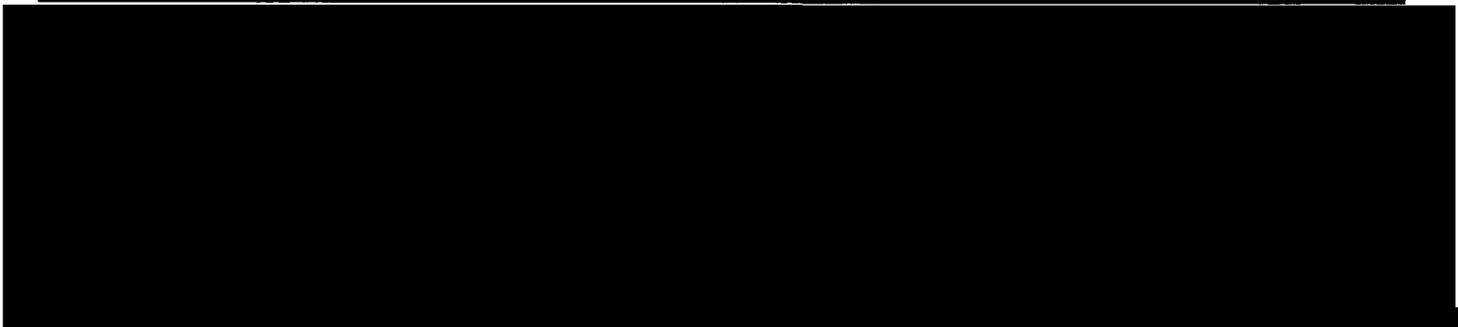
- Annual: The period covered is January 1, 2012, through December 31, 2012
- Leaving Office: Date Left ____/____/____ (Check one)
- Multi-County: The period covered is ____/____/____, through December 31, 2012.
- The period covered is January 1, 2012, through the date of leaving office.
- Assuming Office: Date assumed ____/____/____
- 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: 7

- 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
- None - No reportable interests on any schedule



Date Signed 04/01/2013 (month, day, year)

Agency	Division, Board, Department, District	Position
Board of Supervisors	Board Member	Supervisor
Agua Mansa Industrial Growth Association	Joint Power Authority	Delegate
Omnitrans Board of Directors	Board	Member
San Bernardino International Airport	Airport Authority	Member
San Bernardino Assoc of Govern	Board	Member
SB County Interagency Council on Homeles	Council	Chair
So Coast Air Qlty Management Dist	Board	Member
First 5	Board	Chair
Consolidated Fire Agencies E. Valley	Board	Delegate
Indian Gaming Local Benefit Committee		Alternate
County of San Bernardino	Board Of Supervisors	Board Member
Inland Valley Development Authority	Board	Co-Chair
OWOW	Steering Committee	Member
SANBAG Consolidate Trans. Serv. Agcy	Ad Hoc Committee	Member
Santa Ana River Policy Advisory Grou		Alternate
Santa Ana Water Project Authority		Board Member
South Coast Air Qulaity Managmnt Dis	Administrative Committee	Member
So Coast Air Quality Management Dist	Brain & Lung Tumor and Air Pollution	Member
So Coast Air Quality Management Dist	Legislative Committee	Chair



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
Gonzales, Josie

NAME OF BUSINESS ENTITY
Promerica Bank
GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Lending/Banking Institution
FAIR MARKET VALUE
[X] \$2,000 - \$10,000
NATURE OF INVESTMENT
[X] Stock

NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE
NATURE OF INVESTMENT

NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE
NATURE OF INVESTMENT

NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE
NATURE OF INVESTMENT

NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE
NATURE OF INVESTMENT

NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE
NATURE OF INVESTMENT

Comments:

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name

Gonzales, Josie

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
698 Walnut Street
 CITY
Colton CA 92324

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/_____
 \$10,001 - \$100,000 _____/_____/_____
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 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
9087 Sierra Avenue
 CITY
Fontana CA 92335

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/_____
 \$10,001 - \$100,000 _____/_____/_____
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 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* _____
 ADDRESS (Business Address Acceptable) _____
 BUSINESS ACTIVITY, IF ANY, OF LENDER _____
 INTEREST RATE TERM (Months/Years)
 _____% 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)
 _____% None _____
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

