

Please type or print in ink.

NAME OF FILER

(LAST)

Kehoe

2013 JUN 14 PM 1:08 (WEST)

David

(MIDDLE)

A.

1. Office, Agency, or Court

Agency Name

County of Shasta

Division, Board, Department, District, if applicable

Your Position

Board of Supervisors

District

▶ 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 Shasta

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 \_\_\_\_/\_\_\_\_/\_\_\_\_

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: 4

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

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

Date Signed 5/22/13  
(month, day, year)

Signature



<u>Agency</u>	<u>Position</u>	<u>Department</u>	<u>Categories</u>
County of Shasta	Supervisor District 1	Board of Supervisors	1
Indian Gaming Local Community Benefit Committee	District 1 Supervisor	Indian Gaming Local Community Benefit Committee (LCBC)	1
Shasta Regional Transportation Agency	Member	Shasta Regional Transportation Agency (SRTA)	1
County of Shasta	Member	Air Pollution Control Board	1
Redding Area Bus Authority (RABA)	Member	Redding Area Bus Authority (RABA)	1
Local Agency Formation Commission (LAFCO)	Member	Local Agency Formation Commission (LAFCO)	1





RECEIVED

RECEIVED

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT



STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
SHASTA COUNTY CLERK

MAR 06 2013

RECEIVED  
Date Received  
FEB 28 2013

CLERK OF THE BOARD

Please type or print in ink

2013 MAR 13 PM 12:25

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

Taylor David A.

1. Office, Agency, or Court

Agency Name

County of Shasta - Supervisor

Division, Board, Department, District, if applicable

Your Position

District One

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

Agency:

Taylor to "Attachment A" Member

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County

County of

Shasta

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

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

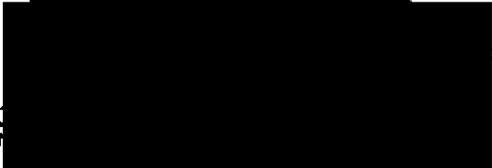
Date Signed 2/28/13

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.



▶ NAME OF BUSINESS ENTITY  
Bank of America

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Banking

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)  
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     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)  
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 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
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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)

*1608 Orange Ave.*

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
*APN 115-011-008-000*

CITY  
*Folsom, Calif*

FAIR MARKET VALUE  
 \$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  
 \$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  
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 \$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: \_\_\_\_\_

David Kehoe- Annual

<u>Agency</u>	<u>Position</u>	<u>Department</u>	<u>Categories</u>
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