

FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

FEB 11 2013

2013 APR 17 PM 1:20

RP Please type or print in ink.
NAME OF FILER (LAST) (FIRST) (MIDDLE)
Vasquez John M.

1. Office, Agency, or Court

Agency Name
Solano County
Division, Board, Department, District, if applicable
Board of Supervisors
Your Position
Supervisor, District 4

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

Agency: See List - Delta Protection Commission Position: Alternate

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

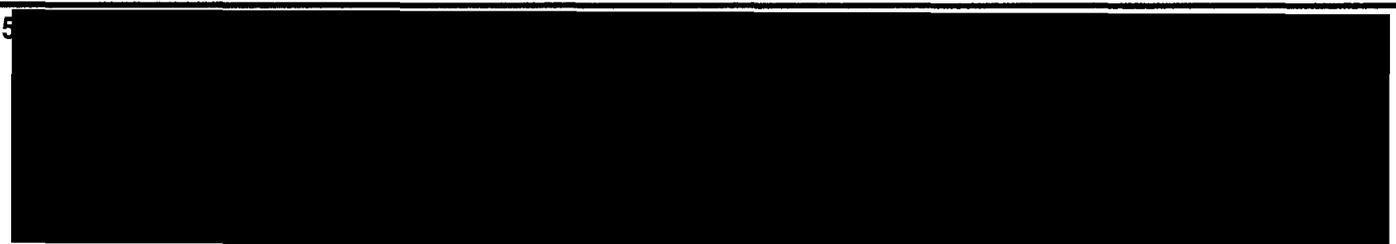
- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of _____ Other Sacramento San Joaquin Delta

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 _____
- 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: 9
- 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 JAN 29 2013
(month, day, year)

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

John M. Vasquez

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
620 East Main Street

CITY
Vacaville, CA 95688

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/12 _____/_____/12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 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
620 East Main Street

CITY
Vacaville, CA 95688

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/12 _____/_____/12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 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*
Housing Successor Agency to Redevelopment**

ADDRESS (Business Address Acceptable)
40 Eldridge Avenue; Suite F; Vacaville, CA 95688

BUSINESS ACTIVITY, IF ANY, OF LENDER
City Government and Agency

INTEREST RATE TERM (Months/Years)
1 % None **25 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*
Successor Agency to the Redevelopment**

ADDRESS (Business Address Acceptable)
40 Eldridge Avenue; Suite F; Vacaville, CA 95688

BUSINESS ACTIVITY, IF ANY, OF LENDER
City Government and Agency

INTEREST RATE TERM (Months/Years)
1 % None **15 years**

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

Comments: ****Agency of the City of Vacaville. See Second Schedule B for additional loan Umpqua Bank (1 of 2)**

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name
John M. Vasquez

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
620 East Main Street

CITY
Vacaville, CA 95688

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*
Umpqua Bank

ADDRESS (Business Address Acceptable)
403 Davis Street; Vacaville, CA 95688

BUSINESS ACTIVITY, IF ANY, OF LENDER
Bank

INTEREST RATE TERM (Months/Years)
8.25 % None 10 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 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: Second Schedule B (2 of 2)

**SCHEDULE D
 Income - Gifts**

Name
John M. Vasquez

▶ NAME OF SOURCE (Not an Acronym)
Kaiser Permanente

ADDRESS (Business Address Acceptable)
975 Sereno Drive; Vallejo, CA 94589

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Medical Center

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 03 / 12	\$ 80	Vaca Fire Crab Feed
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Kaiser Permanente

ADDRESS (Business Address Acceptable)
975 Sereno Drive; Vallejo, CA 94589

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Medical Center

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 25 / 12	\$ 24	Trauma Center Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
NorthBay Healthcare Foundation

ADDRESS (Business Address Acceptable)
4500 Business Center Drive; Fairfield, CA 94534

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Medical Foundation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 27 / 12	\$ 150	Wine/Food Jubilee
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Bayseng Spice Company

ADDRESS (Business Address Acceptable)
296 Camino Sobrente; Orinda, CA 94563

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wholesale organic bay leaf

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 14 / 12	\$ 50	Bay Wreath
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Solano County Fair Association

ADDRESS (Business Address Acceptable)
900 Fairgrounds; Vallejo, CA 94598

BUSINESS ACTIVITY, IF ANY, OF SOURCE
County Fair August 1-5, 2012

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 02 / 12	\$ 300	Tkts rec'd/given staff*
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Dixon Ducks Unlimited Annual Dinner

ADDRESS (Business Address Acceptable)
655 South First Street; Dixon, CA 95620

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Restoration & protection of wetlands

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 07 / 12	\$ 120	(2) tkts for Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: *County Fair tickets given to John M. Vasquez who gave them to Solano County staff.

Please see second Schedule D (1 of 2)



**SCHEDULE D
 Income - Gifts**

Name
John M. Vasquez

▶ NAME OF SOURCE (Not an Acronym)
Richard Shaw

ADDRESS (Business Address Acceptable)
513 Main Street; Vacaville, CA 95688

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Food Service

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 10 / 12	\$ 50	(2) tkts grand opening
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
Northern California Carpenters Regional Council

ADDRESS (Business Address Acceptable)
265 Hegenberger Road; Oakland, CA 94621

BUSINESS ACTIVITY, IF ANY, OF SOURCE
"Moose Feed Luncheon" Carpenters Council

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 14 / 12	\$ 50	Lunch
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
Herman Rowland - Jelly Belly Candy

ADDRESS (Business Address Acceptable)
1 Jelly Belly Lane; Fairfield, CA 94533

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Candy Maker

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 18 / 12	\$ 200	Box assorted candy
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: Second Schedule D (2 of 2)

<u>BOARDS OR COMMISSIONS</u>	<u>JURISDICTION</u>	<u>TITLE</u>
FOUTS SPRINGS RANCH c/o Colusa County Registrar Of Voters 546 Jay Street, Suite 200 Colusa, CA 95932	SOLANO/COLUSA MULTI-COUNTY	CHAIR
SOLANO WATER AUTHORITY 810 Vaca Valley Parkway, Suite 203 VACAVILLE, CA 95688	SOLANO COUNTY	ALTERNATE DIRECTOR
SOLANO COUNTY WATER AGENCY 810 Vaca Valley Parkway, Suite 203 Vacaville, CA 95688	MULTI-COUNTY YOLO @ UC DAVIS SOLANO & RCD #2068	DIRECTOR
YOLO-SOLANO AIR QUALITY MGMT DIST 1947 GALLILEO COURT SUITE 103 DAVIS, CA 95616	MULTI-COUNTY YOLO/SOLANO	DIRECTOR
WINTERS BRANCH LIBRARY FINANCING AUTHORITY COMMUNITY FACILITIES DISTRICT NO. 2001-1 Chris Crist, Business Service Manager 226 BUCKEYE ST. WOODLAND, CA 95695	MULTI-COUNTY YOLO/SOLANO	MEMBER DIRECTOR
VACAVILLE-FAIRFIELD-SOLANO GREENBELT AUTHORITY C/O CITY OF FAIRFIELD 1000 WEBSTER STREET FAIRFIELD, CA 94533	CITIES OF VACAVILLE FAIRFIELD AND COUNTY OF SOLANO	CHAIR
CALIFORNIA FAIRS FINANCING AUTHORITY 1776 TRIBUTE ROAD, SUITE 100 SACRAMENTO, CA 95815	JOINT POWERS AUTHORITY	CHAIR
HOUSING AUTHORITY CHIEF DEPUTY CLERK TO THE BOARD OF SUPERVISORS 675 TEXAS STREET, SUITE 6500 FAIRFIELD, CA 94533	SOLANO COUNTY	BOARD MEMBER
EAST VALLEJO FIRE PROTECTION DISTRICT CHIEF DEPUTY CLERK TO THE BOARD OF SUPERVISORS 675 TEXAS STREET, SUITE 6500 FAIRFIELD, CA 94533	SOLANO COUNTY	BOARD MEMBER
SOLANO FACILITIES CORPORATION CHIEF DEPUTY CLERK TO THE BOARD OF SUPERVISORS 675 TEXAS STREET, SUITE 6500 FAIRFIELD, CA 94533	SOLANO COUNTY	BOARD MEMBER
IN-HOME SUPPORTIVE SERVICES PUBLIC AUTHORITY 275 Beck Avenue; MS 5-190 FAIRFIELD, CA 94533	SOLANO COUNTY	BOARD MEMBER

<u>BOARDS OR COMMISSIONS</u>	<u>JURISDICTION</u>	<u>TITLE</u>
SOLANO LOCAL AGENCY FORMATION COMMISSION 3700 Hilborn Road, Suite 600 Fairfield, CA 94534	SOLANO COUNTY	Alternate Board Member
SOLANO TRANSPORTATION AUTHORITY One Harbor Center, Suite 130 Suisun City, CA 94585	SOLANO COUNTY	Alternate Board Member
SF BAY CONSERVATION AND DEVELOPMENT COMMISSION 50 California Street, 26 th Floor San Francisco, CA 94111-4728	Nine Bay Area Counties	Alternate Board Member
DELTA PROTECTION COMMISSION 2101 Stone Boulevard, Suite 210 West Sacramento, CA 95691	Sacramento San Joaquin Delta	Alternate
REDEVELOPMENT OVERSIGHT BOARD FOR CITY OF DIXON 600 East A Street Dixon, CA 95620	City of Dixon	Board Member