



Date Received
Official Use Only

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE**

AMENDMENT

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
(MIDDLE)

12 JUL 23 PM 1:13

Please type or print in ink.

NAME OF FILER (LAST) (FIRST)
Salas Jr. Rodolfo (Rudy)

1. Office, Agency, or Court

Agency Name
City of Bakersfield
Division, Board, Department, District, if applicable
Ward # 1
Your Position
City Council Member

► 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 **Bakersfield**
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual: The period covered is January 1, 2011, through December 31, 2011.
- or-
- The period covered is _____ through December 31, 2011.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2011, through the date of leaving office.
- The period covered is _____ through the date of leaving office.
- Candidate: Election Year **2012** Office sought, if different than Part 1: **Assembly District # 32**

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

- 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

5. Verification



I certify under penalty of perjury under the laws of the State of California that

Date Signed 7-15-12
(month, day, year)

Signature



SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST

New Horizon Consulting
Name
1200 So. Chester Ave Shafter Ca 93263
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Consulting

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$0 - \$1,999	<u>9 / 7 / 11</u>	<u> / / 11</u>
<input checked="" type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INVESTMENT
 Sole Proprietorship Partnership Other

YOUR BUSINESS POSITION owner

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input checked="" type="checkbox"/> \$1,001 - \$10,000	

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

N/A

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE	
<input type="checkbox"/> \$2,000 - \$10,000	<u> / / 11</u>	<u> / / 11</u>
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold Yrs remaining Other

Check box if additional schedules reporting investments or real property are attached

Comments: _____

Filer's Verification

Print Name Rodolfo (Rudy) Salas Jr.

Office, Agency or Court City of Bakersfield

Statement Type 2011/2012 Annual Annual Assuming Leaving Candidate
(yr)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that (d)(5)

Date Signed 7-15-12 Filer's Signature _____
(month, day, year)



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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Bakersfield Maintenance Services

ADDRESS (Business Address Acceptable)
700 Curtis Dr, Bakersfield, Ca 93307

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Construction

YOUR BUSINESS POSITION
project manager

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

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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)

Comments: Amending form 700 to include schedule C, omitted in error on previous report

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*	INTEREST RATE	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	_____ % <input type="checkbox"/> None	_____
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Real Property _____	<small>Street address</small>
<input type="checkbox"/> \$1,001 - \$10,000	_____	<small>City</small>
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Other _____	<small>(Describe)</small>

Filer's Verification

Print Name **Rodolfo (Rudy) Salas Jr.** Office, Agency or Court **City of Bakersfield**

Statement Type 2011/2012 Annual _____ Annual Assuming Leaving Candidate
(yr)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the fo (d)(5)

Date Signed **7-15-12** Filer's Signature [Redacted]
(month, day, year)



SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE
CSLEA

ADDRESS (Business Address Acceptable)
1415 L St., Ste 410, Sacramento, Ca 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Labor Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 07 / 11	\$ 167.50	Golf tournament
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE
California Tribal Business Alliance

ADDRESS (Business Address Acceptable)
1530 J Street, Ste 400, Sacramento, Ca 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Business Alliance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 02 / 11	\$ 53.62	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Filer's Verification

Print Name **Rodolfo (Rudy) Salas Jr.**

Office, Agency or Court **City of Bakersfield**

Statement Type 2011/2012 Annual Assuming Leaving
 Annual Candidate
(yr)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed **7-15-12**
(month, day, year)

Filer's Signature **(d)(5)**

Comments: Amended to add Schedule C (omitted in error on previous reports)

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

ANN K. BARNETT
KERN COUNTY ELECTIONS

BY [Signature]

2012 MAR -7 PM 1:51

BK TP

12 MAR -9 AM 11:42

Please type or print in ink.

NAME OF FILER (LAST) Salas Jr. (FIRST) Rudy (MIDDLE)

1. Office, Agency, or Court

Agency Name
City of Bakersfield
Division, Board, Department, District, if applicable
Ward #1 Your Position
City Council Member

► 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 Bakersfield
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual: The period covered is January 1, 2011, through December 31, 2011.
- or-
- The period covered is _____ through December 31, 2011.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2011, through the date of leaving office.
- The period covered is _____ through the date of leaving office.
- Candidate: Election Year 2012 Office sought, if different than Part 1: Assembly District 32

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

5. Verification

(d)(5)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/07/2012 Signature (d)(5)
(month, day, year) filing official

CN AD32

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

ANN K. BARNETT
KERN COUNTY ELECTIONS
BY [Signature]

2012 MAR -7 PM 1:51

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Salas Jr. Rudy

1. Office, Agency, or Court

Agency Name
City of Bakersfield
Division, Board, Department, District, If applicable
Ward #1
Your Position
City Council Member

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

Agency: _____ Position: _____

COPY

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

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

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

Annual: The period covered is January 1, 2011, through December 31, 2011.
-or-
The period covered is ____/____/____, through December 31, 2011.
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 Candidate: Election Year 2012 Office sought, if different than Part 1: Assembly District 32
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 The period covered is January 1, 2011, through the date of leaving office.
 The period covered is ____/____/____ through the date of leaving office.

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-or-
 None - No reportable interests on any schedule

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(d)(5)

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I certify under penalty of perjury under the laws of the State of California that (d)(5)

Date Signed 03/07/2012 Signature (d)(5)



SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE
CSLEA
 ADDRESS (Business Address Acceptable)
1415 L Street, Suite 410, Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
CA State Law Enforcement Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 07 / 11	\$ 167.50	Tournament
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE
California Tribal Business Alliance
 ADDRESS (Business Address Acceptable)
1530 J Street, Suite 400, Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 02 / 11	\$ 53.62	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Comments: _____