2013 AN

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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
CLAPP	BETSY	DEAN

RECEIVED FAIR POLITICAL PRACTICES COMMISSION 2014 APR -1 PM 3:38

1. Office, Agency, or Court

Agency Name: CITY OF OJAI

Division, Board, Department, District, if applicable:

Your Position: MEMBER CITY COUNCIL

► 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 OJAI
- ☐ 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, 2012, through December 31, 2012.

-or-

The period covered is 01/01/2013, through 12/31/2013

☒ **Assuming Office:** Date assumed 01/01/2008

☐ **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*

[redacted]

herein and in any attached schedules is true and complete. I ackn[redacted]

I certify under penalty of perjury under the laws of the State of [redacted]

Date Signed 3/24/14
(month, day, year)

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name: BETSY DEAL CLAPP

1. BUSINESS ENTITY OR TRUST

Name: JAVA FROST

Address (Business Address Acceptable): 1250 N. OLIVE, VENTURA

Check one: ☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: FOOD MANUFACTURING

FAIR MARKET VALUE: ☐ $0 - $1,999 ☐ $2,000 - $10,000 ☐ $10,001 - $100,000 ☒ $100,001 - $1,000,000 ☐ Over $1,000,000

IF APPLICABLE, LIST DATE: 01/11/1996 (ACQUIRED) / / 12 (DISPOSED)

NATURE OF INVESTMENT: ☒ Partnership ☐ Sole Proprietorship ☐ Other

YOUR BUSINESS POSITION: OWNER

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

☐ $0 - $499 ☐ $500 - $1,000 ☐ $1,001 - $10,000 ☒ $10,001 - $100,000 ☐ OVER $100,000

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

☐ None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED 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: OJAI COMMUNITY BANK

Description of Business Activity or City or Other Precise Location of Real Property: OJAI COMMUNITY BANK

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 (ACQUIRED) / / 12 (DISPOSED)

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

1. BUSINESS ENTITY OR TRUST

Name:

Address (Business Address Acceptable):

Check one: ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY:

FAIR MARKET VALUE: ☐ $0 - $1,999 ☐ $2,000 - $10,000 ☐ $10,001 - $100,000 ☐ $100,001 - $1,000,000 ☐ Over $1,000,000

IF APPLICABLE, LIST DATE: / / 12 (ACQUIRED) / / 12 (DISPOSED)

NATURE OF INVESTMENT: ☐ Partnership ☐ Sole Proprietorship ☐ Other

YOUR BUSINESS POSITION:

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

☐ $0 - $499 ☐ $500 - $1,000 ☐ $1,001 - $10,000 ☐ $10,001 - $100,000 ☐ OVER $100,000

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

☐ None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED 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: ☐ $2,000 - $10,000 ☐ $10,001 - $100,000 ☐ $100,001 - $1,000,000 ☐ Over $1,000,000

IF APPLICABLE, LIST DATE: / / 12 (ACQUIRED) / / 12 (DISPOSED)

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: