

MAR 25 2014

Received

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Boitano Louis D.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Amador County
Division, Board, Department, District, if applicable Board of Supervisors
Your Position Supervisor District IV

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

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

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

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
2014 APR 28 AM 9:07

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

- Annual: The period covered is January 1, 2013, through December 31, 2013.
- or-
- The period covered is ____/____/____, through December 31, 2013.
- Assuming Office: Date assumed ____/____/____
- Leaving Office: Date Left ____/____/____ (Check one)
- The period covered is January 1, 2013, 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: 12
- 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
[Redacted Signature Area]

I certify under penalty of perjury under the laws of the State of California that the information provided on this statement and in any attached schedules is true and complete.

Date Signed 3-19-14
(month, day, year)

Louis D. Boitano

Additional Boards and Commissions

January 1, 2013 through December 31, 2014

Area 12 Agency on Aging

California State Association of Counties (CSAC)

Central Sierra Child Support Agency

Emergency Medical Care Committee (EMCC) and Emergency Medical Services Agency (EMSA)

Local Agency Formation Commission (LAFCO) ✓

Upper Mokelumne River Watershed Authority (UMRWA) ✓

Amador Fire Protection District (AFPD)

Sierra Nevada Conservancy Sub Region Board

***JURISDICTION OF OFFICE (MULTI-COUNTY)**

Alameda	Glenn	Marin	Placer	San	Stanislaus
Alpine	Humboldt	Mariposa	Plumas	Mateo	Sutter
Amador	Imperial	Mendocino	Riverside	Santa	Tehama
Butte	Inyo	Merced	Sacramento	Barbara	Trinity
Calaveras	Kern	Modoc	San Benito	Santa	Tulare
Colusa	Kings	Mono	San	Clara	Tuolumne
Contra	Lake	Monterey	Bernardino	Santa	Ventura
Costa	Lassen	Napa	San Diego	Cruz	Yolo
Del Norte	Los	Nevada	San	Shasta	Yuba
El Dorado	Angeles	Orange	Francisco	Sierra	
Fresno	Madera		San Joaquin	Siskiyou	
			San Luis	Solano	
			Obispo	Sonoma	

**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
Boitano, Louis

▶ NAME OF BUSINESS ENTITY
Boitano Family Trust

GENERAL DESCRIPTION OF THIS BUSINESS
See Attachment

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:
 / / 13 / / 13
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

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 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:
 / / 13 / / 13
 ACQUIRED DISPOSED

Comments: _____

INVESTMENT SCHEDULE FOR BOITANO FAMILY TRUST

ATTACHMENT TO SCHEDULE A - Investments Held in
Business Entity or Trust

Interest in Investments Held By: Boitano Family Tr

for

Louis D. Boitano

County of Amador, Supervisor District 4

Filing

DESCRIPTION OF SECURITY	FAIR MKRT VALUE
BANKAMERICA CORP COMMON STOCK	\$1,000.00- \$10,000.00
FIRST INTERSTATE BANCORP COMMON STOCK	\$1,000.00- \$10,000.00
IMO INDUSTRIES INC COMMON STOCK	under \$1,000.00
PACIFIC GAS & ELECTRIC CO COMMON STOCK	\$1,000.00- \$10,000.00
SIERRA PACIFIC RESOURCES COMMON STOCK	\$1,000.00- \$10,000.00
TRANSAMERICA CORP COMMON STOCK	\$1,000.00- \$10,000.00
WELLS FARGO & CO COMMON STOCK	\$10,000.00- \$100,000.00

Property Schedule for Boitano Family Trust

Attachment to Schedule B : Interest in Real Property held by Business Entity or Trust

Interest in Real Property held by : Boitano Family Trust for Louis D. Boitano

PARCEL NUMBER	FAIR MARKET VALUE	CITY
18-070-026-00 POR S6 T6 R11 6.78	\$10,000.00-\$100,000.00 (Trust)	Sutter Creek
18-061-001-00 POR Lot 10 Blk 4	\$1,000.00-\$10,000.00 (Trust)	Sutter Creek
15-100-065-00 Golden Crown QM Lot 44 and 60	\$1,000.00-\$10,000.00 (Tenants in Common)	County of Amador
40-010-019-01 POR S6T6R11.82	\$1,000.00-\$10,000.00 (Trust)	County of Amador
15-100-064-00 POR S19T7R11	\$1,000.00-\$10,000.00 (Tenants in Common)	County of Amador
18-163-008 Foundry Field	\$10,000.00-\$100,000.00 (Trust)	Sutter Creek
18-133-010 90 Fullen St.	\$10,000.00-\$100,000.00 (100% Ownership)	Sutter Creek
018-163-004 70 Randolph	\$10,000.00-\$100,000.00 (100% Ownership)	Sutter Creek
18-121-009-02 Mineral Rights	\$10,000.00-\$100,000.00 (Trust)	Sutter Creek
18-172-001 Mineral Rights	\$10,000.00-\$100,000.00 (Trust)	Sutter Creek

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Boitano, Louis

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)
 California State Association of Counties

ADDRESS (Business Address Acceptable)
 1100 K. Street, Suite 101

CITY AND STATE
 Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____/____/____ - ____/____/____ AMT: \$ 362.68
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)
 Best Best & Krieger

ADDRESS (Business Address Acceptable)
 500 Capitol Mall, Suite 700

CITY AND STATE
 Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____/____/____ - ____/____/____ AMT: \$ 91.44
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)
 California State Association of Counties

ADDRESS (Business Address Acceptable)
 1100 K. Street, Suite 101

CITY AND STATE
 Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____/____/____ - ____/____/____ AMT: \$ 1,019.23
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)
 Roseanne Chamberlain-Amador LAFCO Director

ADDRESS (Business Address Acceptable)
 810 Court Street

CITY AND STATE
 Jackson, CA 95642

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____/____/____ 13 - ____/____/____ AMT: \$ 123.39
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

Name
 Boitano, Louis

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)
Amador LAFCO

ADDRESS (Business Address Acceptable)
810 Court Street

CITY AND STATE
Jackson, CA 95642

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): 08 / 27 / 13 - 08 / 29 / 13 AMT: \$ 507.00
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____/____/____ - ____/____/____ AMT: \$ _____
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____/____/____ - ____/____/____ AMT: \$ _____
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE
J

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): ____/____/____¹³ - ____/____/____ AMT: \$ _____
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

Comments: _____



BEST BEST & KRIEGER
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Phone: (916) 325-4000 | Fax: (916) 325-4010 | www.bbklaw.com

Katey Lamke
(916) 329-3680
katey.lamke@bbklaw.com

September 4, 2013

Re: Valuation of the August 28th BB&K Hosted Dinner.

We hope you enjoyed sharing an evening with us in Tahoe. We are glad that you were able to join us.

Under the FPPC regulations for reporting gifts on Form 700, you may need to report the value of the dinner, which is your “pro-rata share” of the cost of the event. According to FPPC Regulations section 18946.2, for “invitation-only” events, such as our dinner, a public official’s “pro rata share” of the cost of the event means: “the cost of the food, catering services, entertainment, and any specific item presented to all attendees as part of the event, divided by the number of acceptances or the number of attendees.”

Based on this FPPC regulation, we have calculated the value of the dinner to be **\$91.44** per person. If a guest accompanied you at the dinner, the value of his/her dinner is also attributable to you as a gift and is required to be reported on your Form 700.

If you have questions about reporting this information on your Form 700, please don’t hesitate to contact us.

Sincerely,

Katey Lamke
Marketing Events Specialist
for BEST BEST & KRIEGER LLP

February 14, 2014



1100 K Street
Suite 101
Sacramento
California
95814

Telephone
916.327.7500
Facsimile
916.441.5507

Louis Boitano
District 4 County Supervisor
Amador County
810 Court Street
Jackson, CA 95642

Louis,

As discussed in previous years, a copy of an opinion given to the League of California Cities (League) by the Fair Political Practices Commission (FPPC) was forwarded to CSAC. The opinion concluded some reimbursements provided to city officials in connection with their service on the League's board and committees were reportable as income on statements of economic interests.

CSAC staff consulted with its legal counsel on this matter who advised us that transportation and lodging, provided directly or reimbursed, and meals provided outside of our meetings were reportable and should be reported as income on statements of economic interests. They would not, however, be reportable for tax purposes.

With regard to gifts, CSAC has received an opinion letter from its counsel, which, in part, states "CSAC has on occasion paid for other costs for a board member's spouse who accompanies the official to a meeting. It is our opinion that all of those additional costs should be reported as gifts, because the spouse is not attending the CSAC meeting in an official way". This most commonly comes in the form of meals for spouses.

We have searched back through our Year 2013 records and have found the following business-related reimbursed expenditures, payments or/and gifts that were made by CSAC in conjunction with your service at a CSAC business related meeting or function:

CSAC Income	\$1019.23
CSAC Gift	\$362.68

I urge you to consult your county counsel if you have questions regarding the applicability of this opinion to your reporting situation. You may also go to the FPPC website at <http://www.fppc.ca.gov/>. Please feel free to contact Kelli Oropeza, CSAC Chief of Financial Operations at 916-327-7500 ext.544, if you have any questions about the dollar amounts provided or this letter.

It continues to be our hope that FPPC will modify this particular section of its regulations, but so far that has not happened.


Kelli Oropeza
Chief of Financial Operations



Reporting for Form 700

Aug 29, 2013

Amador LAFCO <amador.lafco@gmail.com>

Thu, Feb 13, 2014 at 1:21 PM

To: patrick crew <tireguy95642@sbcglobal.net>, Ted Novelli <tnovelli@amadorgov.org>, Jim Vinciguerra <ravioliking@comcast.net>, Louis Boitano <lboitano@amadorgov.org>

Pat Crew asked me to provide the amount for the dinner and drinks I bought for you in order to report it on the Form 700.

The amount per person for the dinner at Gar Woods restaurant was 96.67

The per person cost share of the wine at the CALAFCO Banquet was \$26.72

The Form 700 is due by April 1, and for LAFCO I need a copy with an original wet signature. You could drop off at the LAFCO desk in the County Planning Department, or bring to a LAFCO meeting.

Roseanne Chamberlain
Amador LAFCO Executive Officer
(209) 418-9377



Louis Boitano <lboitano@amadorgov.org>

Fwd: Hotel Reservation Acknowledgement

1 message

Amador LAFCO <amador.lafco@gmail.com>
To: Louis Boitano <lboitano@amadorgov.org>

Mon, Aug 19, 2013 at 11:36 AM

Reservation Confirmation Below

Roseanne Chamberlain
Amador LAFCO Executive Officer
(209) 418-9377

----- Forwarded message -----

From: **Resort at Squaw Creek** <groupcampaigns@pkghlrss.com>
Date: Fri, Jun 28, 2013 at 2:52 PM
Subject: Hotel Reservation Acknowledgement
To: amador.lafco@gmail.com

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RESERVATION CONFIRMATION

Dear Louis Boitano,

Thank you for your reservation at Resort at Squaw Creek. It is our pleasure to confirm the following reservation details. Please click [here](#), or contact our Reservations Department if you would like to make changes to this reservation.

CALAFCO Conference

RESERVATION INFORMATION

Confirmation Number 3275KBGD

Guest Name Louis Boitano

Arrival Date 27-Aug-2013

Departure Date 30-Aug-2013

Room Type Deluxe Queen Valley View Guestroom

Total Stay Amount *507.00

Date	Guest(s)	Status	Rate
27-Aug-2013	1	Confirmed	169.00
28-Aug-2013	1	Confirmed	169.00
29-Aug-2013	1	Confirmed	169.00

Rate Description

Additional Guest	Rate
Second Guest	0.00
Third Guest	0.00
Fourth Guest	0.00
Fifth Guest	0.00

POLICIES

Deposit and Cancellation Policies Cancellations made with in 7 days will forfeit their deposit. A deposit of 1 nights stay will be collected at the time of booking. If you will not be providing the same credit card at check in, please call the Reservations Department at 1-800-327-3353 to request a credit card authorization form.

Check-in time 4:00 pm

Check-out time 11:00 am

Room Tax and Resort Fee Room rates do not include 10% room tax (subject to change) or a .065% CA Tourism Assessment. While staying at the Resort at Squaw Creek, a \$8 resort fee is added daily to each reservation. The fee includes the following amenities within the resort: local and toll free calls (first 30-minutes), USA Today (Monday - Friday), in-room coffee and teas, transportation services to Squaw Valley, usage of the Health Club, Pool and Jacuzzi, wireless internet access and safe deposit boxes located at the

CONTACT INFORMATION