



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
GORIN SUSAN K

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
COUNTY OF SONOMA
Division, Board, Department, District, if applicable
BOARD OF SUPERVISORS
Your Position
FIRST DISTRICT SUPERVISOR

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

Agency: SEE ATTACHED Position: _____

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

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

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 ____/____/____
 Candidate: Election year _____ and office sought, if different than Part 1: _____
 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.

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 8

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. [Redacted Signature Area]

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 March 11, 2014
(month, day, year)

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 SUSAN K GORIN

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME AGILENT TECHNOLOGIES, INC.	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) 1400 Fountaingrove Pkwy, Santa Rosa 95403	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE ELECTRONIC ENGINEER	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ <small>(Describe)</small>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ <small>(Describe)</small>

▶ 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>

Comments: _____

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE (Not an Acronym)
 Sonoma Valley Visitors Bureau

ADDRESS (Business Address Acceptable)
 453 First Street E, Sonoma 95476

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Tourism

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 26 / 13	\$ 120.00	tickets (2)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Girl & the Fig

ADDRESS (Business Address Acceptable)
 110 West Spain St., Sonoma 95476

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Restaurant

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 31 / 13	\$ 120.00	lunch for 2 & book
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Bob Demple

ADDRESS (Business Address Acceptable)
 4570 Brighton Drive, Santa Rosa 95403

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 22 / 13	\$ 110.00	tickets (2)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Sonoma County Horse Council

ADDRESS (Business Address Acceptable)
 PO Box 7157, Santa Rosa, CA 95407

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Equine Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 23 / 13	\$ 170.00	tickets (2)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Cornerstone

ADDRESS (Business Address Acceptable)
 23570 Arnold Drive, Sonoma 95476

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Retail, restaurant and event center

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 22 / 13	\$ 80.00	lunch for 2
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Bohemian Club

ADDRESS (Business Address Acceptable)
 624 Taylor Street, San Francisco 94102

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Private Club

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 18 / 13	\$ 200.00	tickets (2)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____

SCHEDULE D
Income – Gifts

Name
SUSAN K GORIN

▶ NAME OF SOURCE (Not an Acronym)
Matanzas Creek
 ADDRESS (Business Address Acceptable)
6097 Bennett Valley Road, Santa Rosa 95404
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Winery

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 29 / 13</u>	<u>\$ 95.00</u>	<u>ticket</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Sonoma Valley Vintners & Growers
 ADDRESS (Business Address Acceptable)
783 Broadway, Sonoma 95476
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wine education and advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 27 / 13</u>	<u>\$ 50.00</u>	<u>ticket</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Tito Sasaki
 ADDRESS (Business Address Acceptable)
970 Piner Road, Santa Rosa 95403
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Farm Bureau President

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 17 / 13</u>	<u>\$ 180.00</u>	<u>tickets (2)</u>
<u>02 / 27 / 13</u>	<u>\$ 30.00</u>	<u>dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Napa Sonoma Mexican-America Vintners
 ADDRESS (Business Address Acceptable)
PO Box 3338, Napa 94558
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wine advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 17 / 13</u>	<u>\$ 125.00</u>	<u>ticket</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Sonoma County Winegrape Commission
 ADDRESS (Business Address Acceptable)
3637 Winward Way, Santa Rosa 95403
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wine education and advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 31 / 13</u>	<u>\$ 440.00</u>	<u>ticket</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Vintage Festival
 ADDRESS (Business Address Acceptable)
PO Box 652, Sonoma 95476
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 27 / 13</u>	<u>\$ 405.72</u>	<u>tickets (6)</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: _____

SCHEDULE D
Income – Gifts

Name
SUSAN K GORIN

▶ NAME OF SOURCE (Not an Acronym)
Harvest Fair Board
 ADDRESS (Business Address Acceptable)
1350 Bennett Valley Road, Santa Rosa 95404
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fair

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 28 / 13</u>	<u>\$ 200.00</u>	<u>tickets (2)</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Land Paths
 ADDRESS (Business Address Acceptable)
618 Fourth Street #217, Santa Rosa 95404
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Open Space and Conservancy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 18 / 13</u>	<u>\$ 140.00</u>	<u>tickets (2)</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Sonoma Valley Chamber of Commerce
 ADDRESS (Business Address Acceptable)
651 Broadway, Sonoma, CA 95476
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Business advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 06 / 13</u>	<u>\$ 137.50</u>	<u>Spirit of Sonoma event</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Nancy King
 ADDRESS (Business Address Acceptable)
Sonoma, CA 95476
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Pet advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 08 / 13</u>	<u>\$ 125.00</u>	<u>Pets Lifeline event tickt</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Sonoma Valley Chorale
 ADDRESS (Business Address Acceptable)
PO Box 816, Sonoma CA 95476
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Choral group

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 04 / 13</u>	<u>\$ 88.00</u>	<u>tickets (2)</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ 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)
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

Comments: _____

Attachment to California Form 700
Statement of Economic Interests
Annual Statement for Calendar Year 2013
Cover Page – Continued

Susan K. Gorin



<u>Agency</u>	<u>Position</u>
Association of Bay Area Governments	Member
<u>Bay Conservation Development Commission</u>	Commissioner
First 5 Commission	Commissioner
LAFCo	Commissioner
North Bay Water Reuse Authority	Director
Oversight Board for County of Sonoma, As Successor Agency for the Redevelopment Agency	Representative
Sonoma Clean Power	Director
Sonoma County Indian Gaming Commission	Alternate Commissioner
Sonoma Valley Sanitation District	Director