

MAR 18 2014

Please type or print in ink.



MARK CHURCH, County Clerk  
By [Signature]  
DEPUTY CLERK

NAME OF FILER (LAST) GROOM (FIRST) CAROLE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

SAN MATEO COUNTY BOARD OF SUPERVISORS

Division, Board, Department, District, if applicable

Your Position

supervisor

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, City of, Judge or Court Commissioner, County of SAN MATEO, Other

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

- Annual: The period covered is January 1, 2013, through December 31, 2013. Leaving Office: Date Left, The period covered is January 1, 2013, through the date of leaving office. Assuming Office: Date assumed, Candidate: Election year and office sought

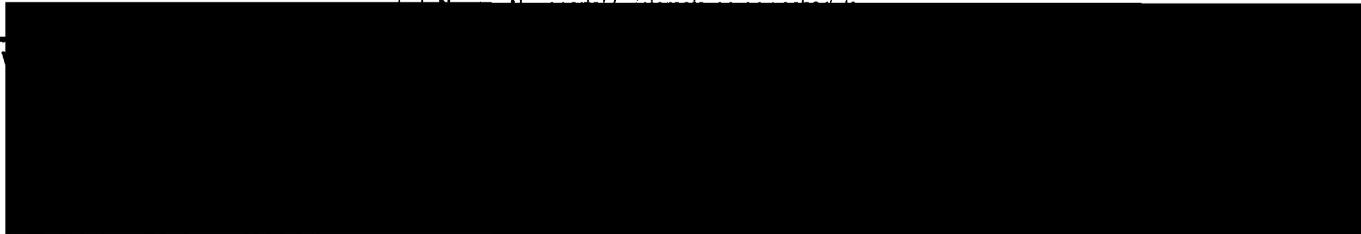
4. Schedule Summary

Check applicable schedules or "None."

Total number of pages including this cover page: 2

- Schedule A-1, A-2, B, C, D, E - schedule attached

5.



I have used all reasonable diligence in preparing this statement. I have read and the information herein and in any attached schedules is true and complete. I acknowledge and understand the contents of this statement and the consequences of my actions.

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

Date Signed MAR 10 2014 (month, day, year)

(File the originally signed statement with your filing official.)

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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
Carole Groom

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>Mills Peninsula - SUNDER HEALTH</u>	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) <u>1501 THURMAN BUCKINGHAM CA 94010</u>	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION <u>Retiree</u>	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input 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 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	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 checked="" type="checkbox"/> Other <u>Retirement Benefits</u> <small>(Describe)</small>	<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)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER	<input type="checkbox"/> Real Property _____	<small>Street address</small>
_____	_____	<small>City</small>
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Other _____	<small>(Describe)</small>
<input type="checkbox"/> \$1,001 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000		

Comments: \_\_\_\_\_