

**STATEMENT OF ECONOMIC INTERESTS**

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FAIR POLITICAL PRACTICES COMMISSION  
COVER PAGE



MARK A. LUNN  
Ventura County Clerk

Please type or print in ink.

NAME OF FILER (LAST) 2014 MAR 24 AM 11:39 (FIRST) Kathy (MIDDLE) I.

**1. Office, Agency, or Court**

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

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

Agency: See Attached List Position: Various

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

- State
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of Ventura
- 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**

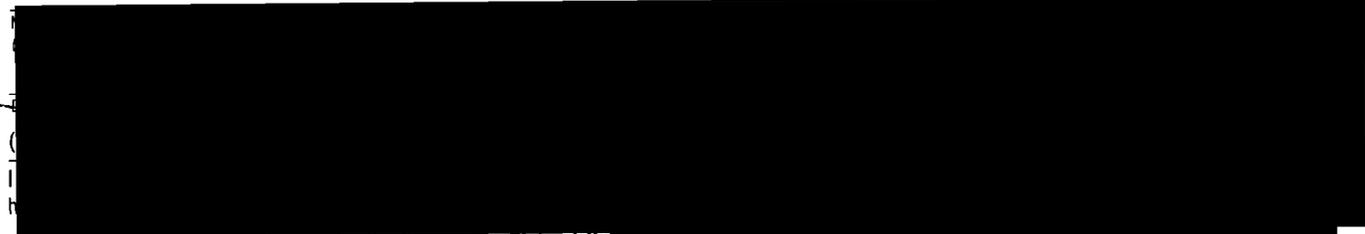
Check applicable schedules or "None."

► Total number of pages including this cover page: 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 the foregoing is true and correct.

Date Signed 03/18/2014  
(month, day, year)

Statement of Economic Interest, 2013 Attachment  
KATHY I. LONG, Ventura County Supervisor, Third District  
Ventura County, California



California State University- <del>Channel Islands</del> , <u>Site Authority</u> /	Board Member	(Annual)
Community Commission of Ventura County	Board Member	(Annual)
Local Agency Formation Commission (LAFCO)	Commissioner	(Annual)
Ventura County Transportation Commission	Board Member	(Annual)
Ventura County Air Pollution Control District	Board Member	(Annual)
Ventura County Regional Energy Alliance (VCREA)	Board Member	(Annual)
First Five Commission	Commissioner	(Annual)
Camarillo/Oxnard Airport Authority	Authority Member	(Annual)
Ventura County Public Finance Authority	Authority Member	(Annual)
Southern California Association of Counties	General Assembly Alt	(Annual)
Ventura County Finance Authority	Authority Member	(Annual)



# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b>
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <b>Kathy I. Long</b>

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

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ADDRESS *(Business Address Acceptable)*  
1100 K Street Suite 101, Sacramento, CA 95814

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BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Statewide Advocacy for counties

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 31 / 14	\$ 915.20	payments while
/ /	\$	rendering duties of
/ /	\$	Association.

▶ 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)
/ /	\$	
/ /	\$	
/ /	\$	

▶ 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)
/ /	\$	
/ /	\$	
/ /	\$	

▶ 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)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

---

ADDRESS *(Business Address Acceptable)*

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE *(Not an Acronym)*

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ADDRESS *(Business Address Acceptable)*

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

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