CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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FAIR POLITICAL PRACTICES COMMISSION
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HUMBOLDT COUNTY ELECTIONS

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Lovelace	Mark	W

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
County of Humboldt

Division, Board, Department, District, if applicable: Board of Supervisors

Your Position: Supervisor - 3rd District

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

Agency: Expanded Statement Attached

Position: _____

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

- ☐ State
- ☐ Multi-County _____
- ☐ City of _____
- ☐ Judge or Court Commissioner (Statewide Jurisdiction)
- ☑ County of Humboldt
- ☐ 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:*** _____

- ☐ **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]

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

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

California Name

2013/2013 FORM 700 **Mark W. Lovelace**
Fair Political Practices Commission

EXPANDED STATEMENT OF ECONOMIC INTERESTS
A Public Document

Agency: North Coast Unified Air Quality Management District
Position Title: Board Member
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

Agency: Community Health Alliance
Position Title: Alternate
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

Agency: First 5 Humboldt
Position Title: Member
Office of Jurisdiction: County of Humboldt
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014

Agency: Humboldt County Indian Gaming Community Benefit Committee
Position: Member
Office of Jurisdiction: Multi-Agency
Type of Statement Annual
[X]The period covered is January 1, 2013 through December 31, 2014

Agency: Juvenile Justice Coordinating Council
Position Title: Member
Office of Jurisdiction: County of Humboldt
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

Agency: Juvenile Justice Delinquency Prevention
Position Title: Member
Office of Jurisdiction: County of Humboldt
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

Agency: Klamath Basin Coordinating Committee
Position Title: Alternate
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

Agency: Arcata Redevelopment Oversight Board
Position Title: Member
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014

California
2013/2014 FORM 700
Fair Political Practices Commission

Name
Mark W. Lovelace

EXPANDED STATEMENT OF ECONOMIC INTERESTS

A Public Document

Agency: Redwood Region Economic Development Commission
Position Title: Alternate
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
[X} The period covered is January 1, 2013 through December 31, 2014.

Agency: Humboldt Transit Authority
Position Title: Member
Office of Jurisdiction: County of Humboldt
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

Agency: Trinity River Basin Fish & Wildlife Task Force
Position Title: Member
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

Agency: Waste Management Authority
Position Title: 1st Alternate
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

Agency: Work Force Investment Board
Position Title: Member
Office of Jurisdiction: County of Humboldt
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

Agency: County Medical Services Program (CMSP) Governing Board
Position Title: Board Member
Office of Jurisdiction: State
Type of Statement: Annual
[X] The period covered is January 1, 2013 through December 31, 2014.

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Lovelace, Mark W

SCHEDULE B
Interests in Real Property
(Including Rental Income)

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
Buttermilk Lane

CITY
Arcata, CA 95521

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

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

NATURE OF INTEREST
☑ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ $0 - $499 ☐ $500 - $1,000 ☐ $1,001 - $10,000
☐ $10,001 - $100,000 ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
☐ None

Primary residence. Not required to disclose. I am disclosing voluntarily for transparency reasons.

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

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

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

NATURE OF INTEREST
☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ $0 - $499 ☐ $500 - $1,000 ☐ $1,001 - $10,000
☐ $10,001 - $100,000 ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
☐ None

* You are not required to report loans from commercial lending institutions 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*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $500 - $1,000 ☐ $1,001 - $10,000
☐ $10,001 - $100,000 ☐ OVER $100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $500 - $1,000 ☐ $1,001 - $10,000
☐ $10,001 - $100,000 ☐ OVER $100,000

☐ Guarantor, if applicable

Comments:

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

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Lovelace, Mark W

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
County of Humboldt

ADDRESS *(Business Address Acceptable)*
825 5th Street, Room #111, Eureka, CA 95501

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Local Government

YOUR BUSINESS POSITION
Supervisor - 3rd District

GROSS INCOME RECEIVED
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☑ $10,001 - $100,000
- ☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- ☑ Salary
- ☐ Spouse's or registered domestic partner's income
- ☐ Loan repayment
- ☐ Partnership
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Commission or
- ☐ Rental Income, *list each source of $10,000 or more*
- ☐ Other _____ *(Describe)*

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Senior Resource Center

ADDRESS *(Business Address Acceptable)*
1910 California Street, Eureka, CA 95501

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non Profit

YOUR BUSINESS POSITION
Administrative Assistant

GROSS INCOME RECEIVED
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☑ $10,001 - $100,000
- ☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- ☐ Salary
- ☑ Spouse's or registered domestic partner's income
- ☐ Loan repayment
- ☐ Partnership
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Commission or
- ☐ Rental Income, *list each source of $10,000 or more*
- ☐ Other _____ *(Describe)*

▶ 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*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

INTEREST RATE
_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN
- ☐ None
- ☐ Personal residence
- ☐ Real Property _____ *Street address*
- _____ *City*
- ☐ Guarantor _____
- ☐ Other _____ *(Describe)*

Comments: _____