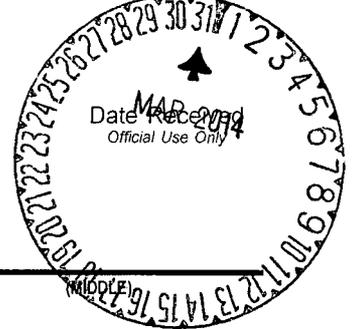


STATEMENT OF ECONOMIC INTERESTS



COVER PAGE



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
McGuire Mike T

1. Office, Agency, or Court

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

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
2014 APR - 7 AM 8:54

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

Agency: See attachment Position: (see attachment)

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

State Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County See attachment 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: _____

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 3/30/14
(month, day, year)

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name _____

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>County of Sonoma</u>	NAME OF SOURCE OF INCOME <u>Sonoma County Office of Education</u>
ADDRESS (Business Address Acceptable) <u>575 Administration Drive Santa Rosa CA 95403</u>	ADDRESS (Business Address Acceptable) <u>5360 Skylane Blvd. Santa Rosa CA 95403</u>
BUSINESS ACTIVITY, IF ANY, OF SOURCE _____	BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Healdsburg Unified School District; Healdsburg High</u>
YOUR BUSINESS POSITION <u>4th District Supervisor</u>	YOUR BUSINESS POSITION <u>High School Teacher</u>
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 checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" 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>	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>

▶ 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 _____ % <input type="checkbox"/> None	TERM (Months/Years) _____
ADDRESS (Business Address Acceptable) _____	SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small>Street address</small> _____ <small>City</small>	
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	<input type="checkbox"/> Guarantor _____	
HIGHEST BALANCE DURING REPORTING PERIOD <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	<input type="checkbox"/> Other _____ <small>(Describe)</small>	

Comments: _____

SCHEDULE D
Income – Gifts

Name _____

▶ NAME OF SOURCE *(Not an Acronym)*
 Tito Sasaki/Sonoma County Farm Bureau

ADDRESS *(Business Address Acceptable)*
 P.O. Box 200, Vineberg, CA 95487

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 02 / 13	\$ 190.00	Crab Feed Tickets (2)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
 Willie Tamayo

ADDRESS *(Business Address Acceptable)*
 3300 Westwind Blvd., Santa Rosa, CA 95403

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 10 / 13	\$ 150.00	YWCA Luncheon Tick
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
 Jane Doroff

ADDRESS *(Business Address Acceptable)*
 506 Hillside Drive, Cloverdale, CA 95425

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 04 / 13	\$ 270.00	Derby Day Tickets (2)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
 Saralee McClelland Kunde

ADDRESS *(Business Address Acceptable)*
 3576 Slusser Road, CA 95482

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 28 / 13	\$ 140.00	Harvest Fair Awards ti
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____



Supervisor Mike McGuire

2013 Form 700 - Statement of Economic Interests Reporting Commissions

- Sonoma County Board of Supervisors
- Sonoma Clean Power
- Sonoma County Transportation Authority (SCTA)
- Regional Climate Protection Authority (RCPA)
- North Bay Water Reuse Authority – Sonoma County Water Agency Representative (alternate)
- ~~Eel/Russian River Commission~~
- North Coast Air Basin Control District
- Sonoma County Indian Gaming Local Community Benefit Committee
- CSAC Board of Directors (alternate)

Supervisor Mike McGuire
Northern Sonoma County's Fourth District