

STATEMENT OF ECONOMIC INTERESTS



COVER PAGE

Date Received
Official Use Only

COUNTY OF SACRAMENTO
BOARD OF SUPERVISORS

14 MAR 26 PM 1:33

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
NOTTOLI DON W.

1. Office, Agency, or Court

Agency Name (Do not use acronyms) FILED
SACRAMENTO COUNTY
BOARD OF SUPERVISORS
Division, Board, Department, District, if applicable Your Position APR 01 2014
DISTRICT 5 BOARD MEMBER

DAVID WILLAMUETH, CLERK/RECORDER
BY [Signature] DEPUTY

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

Agency: SEE ATTACHED LIST Position:

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

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

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
2014 APR 11 PM 4:29

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

4. Schedule Summary

Check applicable schedules or "None." Total number of pages including this cover page: 5
 Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached
 Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached
 Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached
-or-
 None - No reportable interests on any schedule



herein and in any attached schedules is true and complete. I acknowledge that the information provided is true and correct.
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/20/2014
(month, day, year)

BOARDS/COMMISSIONS/AGENCIES	POSITION		CONTACT	ADDRESS	
Area 4 Agency on Aging	Board Member	Multi-County	Pam Miller, Exec. Dir.	2260 Park Towne Circle, Ste 100, Sacramento, CA	95825-0416
Board of Supervisors	Board Member		Lorraine Silva	700 H Street, Ste 2450, Sacramento, CA	95814
Cal-ID RAN Board	Board Member		Fleeman, Christy	Sac County Sheriff Dept., 711 G Street #201, Sac	95814
Capital Southeast Connector JPA	Board Member	Multi-County	Lynn Kalamaras	10640 Mather Blvd., Ste 120, Mather, CA	95655
Delta Conservancy Board	Alt. Bd Member	State	Susan Roberts	1450 Halyard Dr., Ste. 6, West Sacramento, CA	95691
Delta Protection Commission	Director	State	Bree Kaminskis	2101 Stone Blvd., West Sacramento, CA	95691
Freeport Regional Water Authority	Board Member	Multi-County	Lorraine Silva	700 H Street, Ste 2450, Sacramento, CA	95814
Regional Human Rights/Fair Housing Comm Governing Bd	Board Member		Betty Gwiazdon	1112 I Street, Ste.250, Sacramento, CA	95814
Sacramento Area Commerce and Trade Organization(SACTO)	Board Member		Barbara Hayes	400 Capitol Mall, Ste 2500, Sacramento, CA	95814
Sacramento Area Flood Control Agency	Board Member	Multi-County	Lyndee Russell	1007 7th Street, 7th Flr., Sacramento, CA	95814 30-001
Sacramento Central Groundwater Authority	Board Member		Ramon Roybal	827 7th Street, Rm. 301, Sacramento, CA	95814
Sacramento County Mental Health Board	Board Member		Lorraine Silva	700 H Street, Ste 2450, Sacramento, CA	95814
Sacramento County Water Agency	Board Member		Lorraine Silva	700 H Street, Ste. 2450, Sacramento, CA	95814
Sacramento Employment and Training Agency(SETA)	Board Member		Nancy Hogan	925 Del Paso Blvd., Ste. 100, Sacramento, CA	95815
Sacramento Metropolitan Air Quality Management District	Board Member	Multi-County	Nancy Abeels	777 12th Street, 3rd. Flr. Sacramento, CA	95814 100-03
Sacramento Metropolitan Cable Television Commission	Commissioner		Karen Liu	799 G Street, 4th Flr., Sacramento, CA	95814 49-206
Sacramento Public Facilities Financing Corp.	Board Member		Lorraine Silva	700 H Street, Ste. 2450, Sacramento, CA	95814
Sacramento Public Library, JPA	Board Member		Linda Beymer	828 I Street, Sacramento, CA	95814
Sacramento Regional County Sanitation District/ SASD	Board Member		Vicki Brennan	10060 Goethe Road, Sacramento, CA	95827
Sacramento Regional Solid Waste Authority	Alt. Brd. Member		Lorraine Silva	700 H Street, Ste 2450, Sacramento, CA	95814
Sacramento Regional Transit District	Board Member		Cindy Brooks	P.O. Box 2110, Sacramento, CA	95812-2110
Sacramento-San Joaquin-Delta Conservancy	Board Member	Multi-County		1450 Halyard Dr., Ste. 6, West Sacramento, CA	95691
Sacramento Transportation Authority/SAVSA	Board Member		Lorraine Silva	700 H Street, Ste 2450, Sacramento, CA	95814
Sacramento Valley Basinwide Air Pollution Control Council	Council Member	Multi-County	Amy Gwinnup	P O Box 561, Maxwell, CA	95955
Sacramento-Placerville-Transportation Corridor JPA	Board Member	Multi-County	John Segerdell, CEO	Sac-Placer TC, JPA,1321 Howe Ave. Ste 110 Sac,	95825Attn: Lori Merklei
Tobacco Securitization Corporation	Board Member		Lorraine Silva	700 H Street, Ste. 2450, Sacramento, CA	95814



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

CALIFORNIA FORM 700 <small>FAIR POLITICAL PRACTICES COMMISSION</small> Name DON W. NOTTOLI

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME HUMPHREY'S COLLEGE	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) 6550 INGLEWOOD AVE., STOCKTON, CA 95207	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE EDUCATIONAL	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION SPOUSE/INSTRUCTOR	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 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* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER 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	INTEREST RATE _____ % <input type="checkbox"/> None SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small>Street address</small> <small>City</small> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>
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Comments: _____

SCHEDULE D
Income – Gifts

Name
DON W. NOTTOLI

▶ NAME OF SOURCE *(Not an Acronym)*

SACRAMENTO COUNTY FARM BUREAU

ADDRESS *(Business Address Acceptable)*

8970 ELK GROVE BLVD., ELK GROVE 95624

BUSINESS ACTIVITY, IF ANY, OF SOURCE

AGRICULTURE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 31 / 13	\$ 26.50	BREAKFAST
02 / 16 / 13	\$ 25.40	ANNUAL DINNER
___ / ___ / ___	\$ _____	_____

▶ 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)*

SACRAMENTO CONVENTION&VISITORS BUREAU

ADDRESS *(Business Address Acceptable)*

1606 I STREET, SACRAMENTO, 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 08 / 13	\$ 50.00	LUNCHEON, STATE
___ / ___ / ___	\$ _____	OF THE INDUSTRY
___ / ___ / ___	\$ _____	1 TKT

▶ 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)*

SUPERVISOR JIMMIE YEE

ADDRESS *(Business Address Acceptable)*

700 H STREET, #2450, SACRAMENTO, 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 28 / 13	\$ 60.00	20TH ANNUAL ASIAN
___ / ___ / ___	\$ _____	SPORTS FDN CRAB
___ / ___ / ___	\$ _____	FEED, 1TKT

▶ 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: _____