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STEPHEN L. VAGNINI
MONTEREY COUNTY CLERK
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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE



1016129

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
POTTER, DAVE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
County of Monterey
Division, Board, Department, District, if applicable
Clerk Recorder
Your Position
Board of Supervisor
If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS
Position:

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FAIR POLITICAL PRACTICES COMMISSION
2014 APR - 7 AM 8:26

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

State
Multi-County
City of
Judge or Court Commissioner (Statewide Jurisdiction)
County of Monterey
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: 5
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
None - No reportable interests on any schedule



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

Date Signed March 31, 2014
(month, day, year)

Section 1 Additional Agency(ies)/Position(s) for POTTER, DAVE:

Agency	Division, Board, Department, District	Position
County of Monterey	Pajaro County Sanitation District	Board of Supervisor
County of Monterey	Boronda County Sanitation District	Board of Supervisor
County of Monterey	Carmel Valley County Sanitation District	Board of Supervisor
Monterey County Board of Supervisors	5th District	Supervisor
Natividad Medical Center	Board of Trustees	Board Member
Transportation Agency of Monterey County		Board Member
Monterey Peninsula Water Management District		Board Member
Fort Ord Reuse Authority		Board Member
Monterey County Convention and Visitors Bureau		Board Member
Water Resources Agency	Monterey County	Board Member
Redevelopment Agency	Monterey County	Board Member
Moss Landing Sanitation District	County	Board Member
Coast Rail Coordinating Council		Board Member
Arts Council for Monterey County		Alternate Board Member
CA State Association of Counties		Alternate Board Member
Seaside Groundwater Basin Watermaster		Board Member
Workforce Investment Board		Board Member
Oversight Board for the Successor Agency of the City of Monterey		Board Member
County of Monterey	Economic Opportunity Committee	Member

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST

Potter Construction
Name
215 W. Franklin Street Suite 316
Monterey, CA 93940
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Construction Company

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	____/____/____ ____/____/____
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED DISPOSED
<input checked="" type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION Owner

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/____ ____/____/____
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold _____ Yrs. remaining Other _____
 Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Name
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	____/____/____ ____/____/____
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

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Description of Business Activity or
City or Other Precise Location of Real Property

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<input type="checkbox"/> \$2,000 - \$10,000	____/____/____ ____/____/____
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold _____ Yrs. remaining Other _____
 Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE D
Income – Gifts

Name
 POTTER, DAVE

▶ NAME OF SOURCE (Not an Acronym)
AT&T ProAm Tournament
 ADDRESS (Business Address Acceptable)
 270 17th Mile Drive
 Pebble Beach, CA 93953
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Charity Golf Tournament

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 09 / 13	\$ 100.00	Tournament Tickets and Lunch
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Pebble Beach Company
 ADDRESS (Business Address Acceptable)
 PO Box 1522
 Pebble Beach, CA 93953
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Hospitality

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 18 / 13	\$ 150.00	Concours d'Elegance Brunch
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Cannery Row Company
 ADDRESS (Business Address Acceptable)
 765 Wave Street
 Monterey, CA 93940
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Properties & Restaurants

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 20 / 13	\$ 40.00	Holiday Flowers
11 / 26 / 13	\$ 40.00	Holiday Flowers
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Denise Duffy
 ADDRESS (Business Address Acceptable)
 947 Cass Street Suite 5
 Monterey, CA 93940
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Planning

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 18 / 13	\$ 30.00	Chocolates
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Richard Warren
 ADDRESS (Business Address Acceptable)
 24405 San Luis Ave
 Carmel, CA 93923
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 16 / 13	\$ 30.00	Chocolates
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Margaret Robbins
 ADDRESS (Business Address Acceptable)
 3850 Rio Road
 Carmel, CA 93923
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 12 / 13	\$ 40.00	Nothing Bundt Cake
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____