

COVER PAGE
FAIR POLITICAL
PRACTICES COMMISSION
(FIRST)

RECEIVED

Please type or print in ink.

NAME OF FILER (LAST) **Ruhstaller** (FIRST) **Lawrence** (MIDDLE) **Ob**
2014 MAR 14 PM 1:45

1. Office, Agency, or Court

Agency Name (Do not use acronyms) **DEPUTY**
San Joaquin County Board of Supervisors
Division, Board, Department, District, if applicable **District 2** Your Position **County Supervisor**

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

Agency: See Attachment Position: _____

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

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of San Joaquin
- 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 ____/____/____
- 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: _____
- 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. V

I have used all reasonable diligence in preparing this statement. I have reviewed the information herein and in any attached schedules is true and complete. I acknowledge the accuracy of the information.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/11/2014
(month, day, year)



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) BY: FPPC - [Signature] REG. DIR. OF VOTERS
Ruhstaller Frank LAWRENCE SAN JOAQUIN COUNTY

1. Office, Agency, or Court

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

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

Agency: Delta Stewardship Council Position: Commissioner

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

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

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2013, through December 31, 2013. Leaving Office: Date Left ____/____/____ (Check one)
- or- The period covered is ____/____/____, through December 31, 2013. The period covered is ____/____/____, through the date of leaving office.
- Assuming Office: Date assumed ____/____/____ 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: _____
- 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

5. [Redacted]

herein and in any attached schedules is true and complete. I acknowledge
I certify under penalty of perjury under the laws of the State of California
Date Signed 02/15/2014
(month, day, year)

Agency Filings

Delta Protection Commission /

Local Agency Formation Commission (LAFCO)

Delta Stewardship Council /

Health Commission/Health Plan of San Joaquin

San Joaquin Flood Control Agency (SJAFCA)

Position

Commissioner/Chairman

Commissioner

Commissioner

Commissioner

Commissioner