

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

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CITY CLERK'S OFFICE  
CITY OF SOUTH LAKE TAHOE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
City of South Lake Tahoe Council member  
Division, Board, Department, District, if applicable Your Position  
Councilmember

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

Agency: California Tahoe Conservancy Position: Board Member

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
15 APR - 2 AM 11:32

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

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

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

- Annual: The period covered is January 1, 2014, through December 31, 2014.
- Leaving Office: Date Left (Check one)
- The period covered is January 1, 2014, through the date of leaving office.
- Assuming Office: Date assumed through
- 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
  - None - No reportable interests on any schedule

Date Signed 3/25/15  
(month, day, year)

**SCHEDULE A-1  
Investments**

**Stocks, Bonds, and Other Interests  
(Ownership Interest is Less Than 10%)**

*Do not attach brokerage or financial statements.*

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Tom DAVIS

▶ NAME OF BUSINESS ENTITY  
Tahoe Keys Resort

GENERAL DESCRIPTION OF THIS BUSINESS  
VACATION Resort Rentals

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 14      \_\_\_\_\_ / \_\_\_\_\_ / 14  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 14      \_\_\_\_\_ / \_\_\_\_\_ / 14  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 14      \_\_\_\_\_ / \_\_\_\_\_ / 14  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 14      \_\_\_\_\_ / \_\_\_\_\_ / 14  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 14      \_\_\_\_\_ / \_\_\_\_\_ / 14  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 14      \_\_\_\_\_ / \_\_\_\_\_ / 14  
 ACQUIRED                                  DISPOSED

Comments: \_\_\_\_\_

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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
Tom Davis

**1. BUSINESS ENTITY OR TRUST**

Name Tahoe Keys Resort  
 Address (Business Address Acceptable) 599 TAHOE KEYS BLVD. SUITE 100 CALIF 96108

Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS  
VACATION RESORT

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 1/14 DISPOSED 1/14

NATURE OF INVESTMENT  
 Partnership  Sole Proprietorship  Share Holder  
Other

YOUR BUSINESS POSITION Share Holder; Board member

**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 or  Names listed below

**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:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 1/14 DISPOSED 1/14

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:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 1/14 DISPOSED 1/14

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 or  Names listed below

**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:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 1/14 DISPOSED 1/14

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

L...

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
Tom Davis

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
RED HAWK CASINO

ADDRESS (Business Address Acceptable)  
1 RED HAWK PARKWAY, PLACERVILLE, CALIF

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
CASINO

YOUR BUSINESS POSITION  
CASHIER

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  
 (For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)

Loan repayment

Commission or  Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 (Describe)

Other \_\_\_\_\_  
 (Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
NEVA ONE LLC

ADDRESS (Business Address Acceptable)  
1300 BUCKEYE RD SUITE A

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
MINERAS, NEV

YOUR BUSINESS POSITION  
RANCHING CASINO OWNER 89423

YOUR BUSINESS POSITION  
CONSULTANT

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  
 (For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)

Loan repayment

Commission or  Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 (Describe)

Other CONSULTANT  
 (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: \_\_\_\_\_

**SCHEDULE D**  
**Income - Gifts**

Name  
TOM DAVIS

▶ NAME OF SOURCE (Not an Acronym)  
Harveys Outdoor Arena  
ADDRESS (Business Address Acceptable)  
Highway 50, STATELINE, NV  
BUSINESS ACTIVITY, IF ANY, OF SOURCE 89449  
CASINO/ HOTEL

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/24/14</u>	<u>\$ 100.00</u>	<u>2 TICKETS @ 50.00 each</u> <u>SPRUELL Mc LACHLAN</u>
<u>   </u>	<u>   </u>	<u>   </u>
<u>   </u>	<u>   </u>	<u>   </u>

▶ NAME OF SOURCE (Not an Acronym)  
Harveys Outdoor Arena  
ADDRESS (Business Address Acceptable)  
Highway 50 STATELINE, NV  
BUSINESS ACTIVITY, IF ANY, OF SOURCE 89449  
CASINO/ HOTEL

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>8/29/14</u>	<u>\$ 100.00</u>	<u>2 TICKETS @ 50.00</u> <u>EAGLES each</u>
<u>   </u>	<u>   </u>	<u>   </u>
<u>   </u>	<u>   </u>	<u>   </u>

▶ NAME OF SOURCE (Not an Acronym)  
Harveys Outdoor Arena  
ADDRESS (Business Address Acceptable)  
Highway 50 STATELINE, NV 89449  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
CASINO/ HOTEL

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>8/2/14</u>	<u>\$ 140.00</u>	<u>2 TICKETS @ 70.00 each</u> <u>LADY BARR</u>
<u>   </u>	<u>   </u>	<u>   </u>
<u>   </u>	<u>   </u>	<u>   </u>

▶ NAME OF SOURCE (Not an Acronym)  
Lake Tahoe Visitors Authority  
ADDRESS (Business Address Acceptable)  
169 Highway 50 STATELINE, NV  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Marketing/Promotion of S.L.T.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7/17/14</u>	<u>\$ 400.00</u>	<u>V.I.P PASS</u> <u>GOLF TOURNAMENT</u>
<u>   </u>	<u>   </u>	<u>   </u>
<u>   </u>	<u>   </u>	<u>   </u>

▶ NAME OF SOURCE (Not an Acronym)  
Harveys Outdoor Arena  
ADDRESS (Business Address Acceptable)  
Highway 50, STATELINE, NV  
BUSINESS ACTIVITY, IF ANY, OF SOURCE 89449  
CASINO/ HOTEL

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>8/14/14</u>	<u>\$ 100.00</u>	<u>2 TICKETS @ 50.00 each</u> <u>Bruno Mars</u>
<u>   </u>	<u>   </u>	<u>   </u>
<u>   </u>	<u>   </u>	<u>   </u>

▶ 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)
<u>   </u>	<u>   </u>	<u>   </u>
<u>   </u>	<u>   </u>	<u>   </u>
<u>   </u>	<u>   </u>	<u>   </u>

Comments: \_\_\_\_\_