

STATEMENT OF ECONOMIC INTERESTS



COVER PAGE

Date Received: FEB 23 2015
Official Use Only

HUMBOLDT COUNTY ELECTIONS

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Bass Virginia a

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

County of Humboldt

Division, Board, Department, District, if applicable

Your Position

Board of Supervisors

Supervisor - 4th District

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

Agency: Expanded Statement Attached

Position:

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
2015 FEB 26 PM 3:18

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of Humboldt

City of _____

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)

-or-

The period covered is ____/____/____, through December 31, 2014.

The period covered is January 1, 2014, 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]

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

Date Signed 2-20-15
(month, day, year)

EXPANDED STATEMENT OF ECONOMIC INTERESTS
A Public Document

Agency: North Coast Air Quality Management District
Position Title: Alternate
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
 The period covered is January 1, 2014 through December 31, 2014.

Agency: Redwood Coast Energy Authority
Position Title: Alternate
Office of Jurisdiction: Multi-Agency
Type of Statement: Assuming Office
 The period covered is January 1, 2015 through December 31, 2015.

Agency: Hazardous Materials Response Authority
Position Title: Member
Office of Jurisdiction: Joint Powers Authority
Type of Statement: Annual
 The period covered is January 1, 2014 through December 31, 2014.

Agency: Local Agency Formation Commission (LAFCO)
Position Title: Member
Office of Jurisdiction: County of Humboldt
Type of Statement: Annual
 The period covered is January 1, 2014 through December 31, 2014.

Agency: Behavioral Health Board
Position Title: Board Member
Office of Jurisdiction: County of Humboldt
Type of Statement: Annual
 The period covered is January 1, 2014 through December 31, 2014.

Agency: Eureka Redevelopment Oversight Board
Position Title: Member
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
 The period covered is January 1, 2014 through December 31, 2014.

Agency: Redwood Region Economic Development Commission
Position Title: Member
Office of Jurisdiction: Multi-Agency
Type of Statement: Annual
 The period covered is January 1, 2014 through December 31, 2014.

Agency: Waste Management Authority
Position Title: Alternate
Office of Jurisdiction: Multi-Agency
Type of Statement: Assuming Office
 The period covered is January 1, 2015 through December 31, 2015.

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

Name
Bass, Virginia A

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
County of Humboldt

ADDRESS (Business Address Acceptable)
825 5th Street, Room #111, Eureka, CA 95501

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Local Government

YOUR BUSINESS POSITION
Supervisor - 4th District

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
Wells Fargo Bank

ADDRESS (Business Address Acceptable)
805 G Street, Eureka, CA 95501

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Banking

YOUR BUSINESS POSITION
Mortgage 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 _____
(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
 Bass, Virginia A

▶ NAME OF SOURCE *(Not an Acronym)*
 Macys

ADDRESS *(Business Address Acceptable)*
 415 K Street, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Retail Department Store

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 19 / 14	\$ 250.00	Gift Certificate
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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

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

▶ 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: _____

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Bass, Virginia A

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 California State Association of Counties (CSAC)

ADDRESS (Business Address Acceptable)
 1100 K Street, # 101, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 California Counties Advocacy Representatives

YOUR BUSINESS POSITION

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 Meals/Lodging at CSAC Executive Meetings
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

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)

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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: _____