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STATEMENT OF ECONOMIC INTERESTS FAIR POLITICAL PRACTICES COVER PAGE

FILED Napa County Assessor-Recorder-County Clerk Election Division

MAR 31 2015

Please type or print in ink.

15 APR -6 PM 3:56

NAME OF FILER (LAST) Caldwell (FIRST) Keith (MIDDLE)

Deputy Recorder-Clerk [Signature]

1. Office, Agency, or Court

Agency Name (Do not use acronyms) County of Napa Division, Board, Department, District, if applicable Board of Supervisors Your Position Board Member, District 5

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

Agency: see attached list Position: see attached list

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

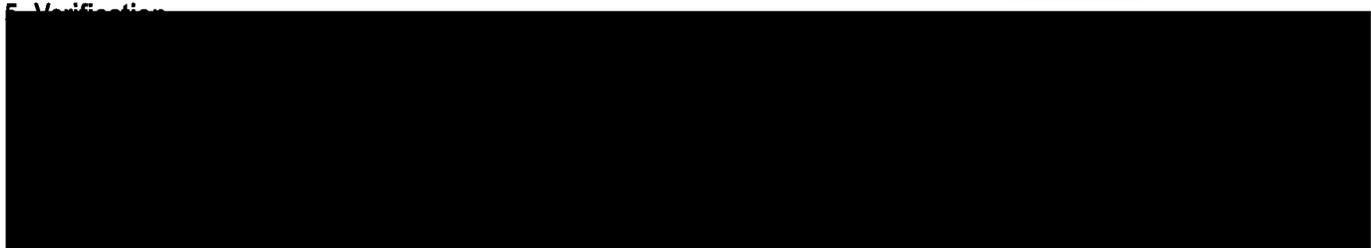
- State, Multi-County, City of, Judge or Court Commissioner (Statewide Jurisdiction), County of Napa, Other

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, The period covered is January 1, 2014, through the date of leaving office. Assuming Office: Date assumed, The period covered is 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: 4. 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 foregoing is true and correct.

Date Signed 3/24/15 (month, day, year)

STATEMENT OF ECONOMIC INTERESTS

1. Office, Agency or Court Expanded List:

<u>Agency</u>	<u>Position</u>
Napa County Board of Supervisors	Board Member
Napa County Board of Equalization	Board Member
Silverado Community Services District	Board Member
Lake Berryessa Resort Improvement District	Board Member
Napa-Berryessa Resort Improvement District	Board Member
Monticello Public Cemetery District	Board Member
Napa County Flood Control & Water Conservation District	Board Member
Napa County Flood Protection & Watershed Improvement Authority	Board Member
In-Home Supportive Services Public Authority of Napa County	Board Member
Napa County Housing Authority	Board Member
Napa County Public Improvement Corporation	Board Member
Napa Valley Tourism Improvement District	Board Member
Association of Bay Area Governments – San Francisco Bay Restoration Authority	Board Member
San Francisco Bay Conservation & Development Commission	Alternate Board Member
Napa Sanitation District	Board Member
Napa County Transportation Planning Agency (NCTPA)	Board Member
Napa Valley Transportation Authority	Member
Local Agency Formation Commission (LAFCO)	Alternate
North Bay Water Reuse Authority Committee (NBWRA)	Board Member

SCHEDULE D
Income – Gifts

Name
 Keith Caldwell

▶ NAME OF SOURCE *(Not an Acronym)*
 Winegrowers of Napa Valley

ADDRESS *(Business Address Acceptable)*
 P.O. Box 5937, Napa, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Winegrower Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 11 / 14	\$ 75.00	Holiday Luncheon (1)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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

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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____