ELECTIONS
Date Initial Filing
Received
FEB 24 2015
Official Use Only
Received

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS

GP

COVER PAGE

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
MORGAN	LYNN	A.

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*: Amador County

Division, Board, Department, District, if applicable: Board of Supervisors

Your Position: Supervisor, D3

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

Agency: _____ Position: _____

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

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

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

☐ **Annual:** The period covered is January 1, 2014, through December 31, 2014.

-or-

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

☒ **Assuming Office:** Date assumed 1/5/15

☐ **Leaving Office:** Date Left ___/___/___ *(Check one)*

○ The period covered is January 1, 2014, 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: _____

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
15 APR -1 PM 2:51

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*

[redacted]

herein and in any attached schedules is true and complete. I ack

I certify under penalty of perjury under the laws of the State

Date Signed 2/24/15
(month/day, year)

[redacted]

FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov