

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

**ELECTIONS**  
 Date Initial Filing  
 Received Official Use Only  
**MAR 13 2015**  
**Received**



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
 Plasse III Maurice John

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)

Amador County board of Supervisors

Division, Board, Department, District, if applicable

District 1

Your Position

Supervisor

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

Agency: See Attached

Position:

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 PRACTICES COMMISSION  
 15 APR - 1 PM 2:51

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County See Attached

County of \_\_\_\_\_

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: 5

**Schedule A-1 - Investments** - schedule attached

**Schedule C - Income, Loans, & Business Positions** - schedule attached

**Schedule A-2 - Investments** - schedule attached

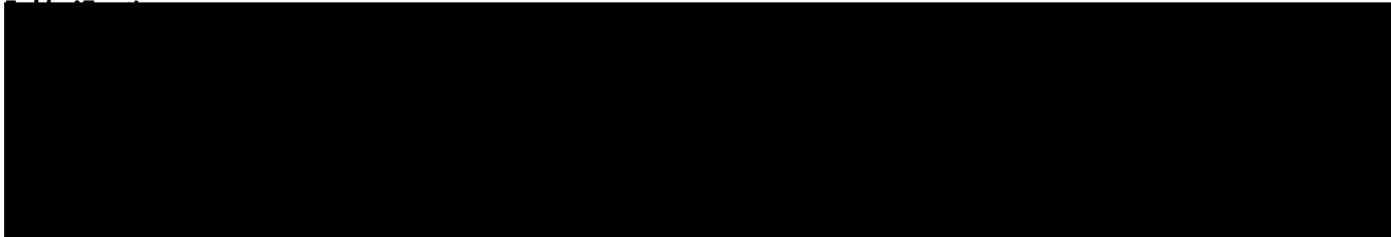
**Schedule D - Income - Gifts** - schedule attached

**Schedule B - Real Property** - schedule attached

**Schedule E - Income - Gifts - Travel Payments** - schedule attached

-or-

**None - No reportable interests on any schedule**



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

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

Date Signed 03/13/2015

(month, day, year)



**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
**Maurice John Plasse, III**

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
**7535 French Bar Rd.**

CITY  
**Jackson, CA**

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      /      / **14**      DISPOSED      /      / **14**

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       Other \_\_\_\_\_

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
**24 del Vista**

CITY  
**Sutter Creek, CA**

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      /      / **14**      DISPOSED      /      / **14**

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       Other \_\_\_\_\_

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

\* You are not required to report loans from commercial lending institutions 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 \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %       None      TERM (Months/Years) \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %       None      TERM (Months/Years) \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

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

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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
 Maurice John Plasse, III

1. INCOME RECEIVED	1. INCOME RECEIVED
NAME OF SOURCE OF INCOME Law Office of Jeffrey D. Seaton	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) 836 N. Highway 49/88, Jackson, CA 95642	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE Law Office	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION Secretary	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)	<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)
<input type="checkbox"/> Loan repayment	<input type="checkbox"/> Loan repayment
<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe)	<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe)
<input type="checkbox"/> Other _____ (Describe)	<input type="checkbox"/> 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*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable) _____	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Real Property _____ Street address	
<input type="checkbox"/> \$500 - \$1,000	_____ City	
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Other _____ (Describe)	
<input type="checkbox"/> OVER \$100,000		

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

John Plasse



**Additional Boards and Commissions for 2014**

**Amador-Tuolumne Community Action Agency (A-TCAA) (Alternate)**

**Amador County Transportation Commission (ACTC)**

**Emergency Medical Care Committee (EMCC) and Emergency Medical Services (EMSA)**

**Local Community Benefit Committee**

**Amador Economic Development Corporation (AEDC)**

**Calaveras Amador Mokelumne River Authority (CAMRA)**

**CSAC Excess Insurance Authority**

**Mokelumne Watershed Interregional Sustainability Evaluation Program (MokeWISE)**

**Rural County Representatives of California (RCRC)**

**Amador Fire Protection District**

**\*JURISDICTION OF OFFICE (MULTI-COUNTY)**

Alameda	Glenn	Marin	Placer	San Mateo	Stanislaus
Alpine	Humboldt	Mariposa	Plumas	Santa Barbara	Sutter
Amador	Imperial	Mendocino	Riverside	Santa Clara	Tehama
Butte	Inyo	Merced	Sacramento	Santa Cruz	Trinity
Calaveras	Kern	Modoc	San Benito	Shasta	Tulare
Colusa	Kings	Mono	San Bernardino	Sierra	Tuolumne
Contra Costa	Lake	Monterey	San Diego	Siskiyou	Ventura
Del Norte	Lassen	Napa	San Francisco	Solano	Yolo
El Dorado	Los Angeles	Nevada	San Joaquin	Sonoma	Yuba
Fresno	Madera	Orange	San Luis Obispo		