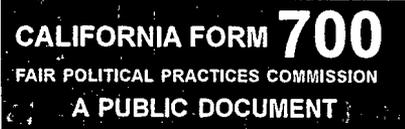


2014 AN



STATEMENT OF ECONOMIC INTERESTS

FILED Date Initial Filing Received JAN 28 2015

COVER PAGE



FRESNO COUNTY CLERK

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) DEPUTY Poochigian Deborah A.

1. Office, Agency, or Court

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

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

Agency: See Attachment "A" Position:

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

State Multi-County See Attachment "A-1" City of Judge or Court Commissioner (Statewide Jurisdiction) County of Fresno 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 01 / 06 / 2015
Assuming Office: Date assumed 01 / 06 / 2015
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: 14
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

5. [Redacted signature area]

I have used all reasonable diligence in preparing this statement. I have verified that the information herein and in any attached schedules is true and complete. I acknowledge that this statement and any attached schedules are public records. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed January 26, 2015 (month, day, year)

(File the originally signed statement with your filing official.)



▪ Fresno County Board of Supervisors

1. Office: Board Member
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Annual Office 01/01/14 – 12/31/14

▪ Fresno Council of Fresno County Governments

1. Office: Board Member - Alternate
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Leaving Office 1/1/14 – 1/6/15

▪ Fresno County Tobacco Funding Corporation

1. Office: Vice President
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Fresno-Clovis Metropolitan Solid Waste Commission

1. Office: Board Member
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Fresno-Madera Area Agency on Aging Governing Board

1. Office: Board Member - Alternate
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno and Madera Counties
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Fresno Clovis Convention and Visitor Bureau

1. Office: Board Member
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Assuming Office 01/06/14 – 1/6/15

▪ Solid Waste Appeals Board

1. Office: Board Member - Alternate
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Fresno-Kings-Madera Regional Health Authority

1. Office: Commissioner
Covered by Conflict of Interest Code
2. Jurisdiction: Counties of Fresno, Madera, and Kings
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Indian Gaming Local Benefit Committee

1. Office: Committee Member
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Local Agency Formation Commission

1. Office: Commissioner – Alternate
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Leaving Office 01/01/14 – 1/6/15

▪ California County Tobacco Securitization Agency

1. Office: Commissioner
Covered by Conflict of Interest Code
2. Jurisdiction: Counties of Alameda, Fresno, Kern, Marin, Merced, Placer, Sonoma, Stanislaus, and Los Angeles.
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ San Joaquin River Conservancy

1. Office: Board Member - Alternate
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno and Madera Counties
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ San Joaquin Valley Insurance Authority

1. Office: Commissioner
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno and Tulare Counties
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Selma-Kingsburg-Fowler County Sanitation District

1. Office: Board Member - Alternate
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Sierra Nevada Conservancy

1. Office: Liaison
Covered by Conflict of Interest Code
2. Jurisdiction: Various Counties
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Upper Kings Basin Integrated Regional Water Management Authority

1. Office: Committee Member
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno, Tulare, Kings
3. Type of Statement: Leaving Office 01/01/14 – 1/6/15

▪ West County Solid Waste Planning Board

1. Office: Committee Member
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Redevelopment Oversight Board – City of Fresno

1. Office: Board Member
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ Yosemite/Sequoia Resource Conservation and Development Area Council

1. Office: Board Member
Covered by Conflict of Interest Code
2. Jurisdiction: Counties of Fresno, Madera, Mariposa, and Tulare
3. Type of Statement: Annual 01/01/14 - 12/31/14

▪ In-Home Supportive Services Public Authority

1. Office: Board Member
Covered by Conflict of Interest Code
2. Jurisdiction: Fresno County
3. Type of Statement: Annual 01/01/14 - 12/31/14

- California County Tobacco Securitization Agency
Alameda ~ Fresno ~ Kern ~ Marin ~ Merced ~ Placer ~ Sonoma ~ Stanislaus
Los Angeles
- Fresno-Madera Area Agency on Aging Governing Board
Fresno ~ Madera
- Fresno-Madera-Kings Regional Health Authority
Fresno ~ Madera ~ Kings
- San Joaquin River Conservancy
Fresno ~ Madera
- Yosemite/Sequoia Resource Conservation and Development Area Council
Fresno ~ Madera ~ Mariposa ~ Tulare
- San Joaquin Valley Insurance Authority
Fresno ~ Tulare
- Sierra Nevada Conservancy
Fresno ~ Tulare ~ Alpine ~ Amador ~ Butte ~ Calaveras ~ El Dorado ~ Inyo ~ Kern ~ Lassen
Madera ~ Mariposa ~ Modoc ~ Mono ~ Nevada ~ Placer ~ Plumas ~ Shasta ~ Sierra ~ Tehama
Tuolumne ~ Yuba
- Upper Kings Basin Integrated Regional Water Management Authority
Fresno ~ Tulare ~ Kings

**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 Deborah A. Poochigian
--

▶ NAME OF BUSINESS ENTITY
Westamerica Bancorporation

GENERAL DESCRIPTION OF THIS BUSINESS
Banking

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
Bank of America

GENERAL DESCRIPTION OF THIS BUSINESS
Banking

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
Agios Pharmaceuticals Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Medical research and product development

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
Citigroup, Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Banking and financial services

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
Allianz NFJ Dividend Int. & Prem. Strategy Fd

GENERAL DESCRIPTION OF THIS BUSINESS
Mutual Fund

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 Closed-end mutual fund (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
Coca Cola Co.

GENERAL DESCRIPTION OF THIS BUSINESS
Beverage manufacturer

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-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name
Deborah A. Poochigian

▶ NAME OF BUSINESS ENTITY
Beacon Roofing Supply, Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Roofing and building products distributor

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:
10 / 09 / 14 _____ / _____ / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Pacific Biosciences

GENERAL DESCRIPTION OF THIS BUSINESS
Biological research and manufacturing

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:
02 / 19 / 14 _____ / _____ / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Duke Energy

GENERAL DESCRIPTION OF THIS BUSINESS
Energy company

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:
08 / 26 / 14 _____ / _____ / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Spectra Energy Corp.

GENERAL DESCRIPTION OF THIS BUSINESS
Energy company

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:
08 / 26 / 14 _____ / _____ / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
IPG Photonics Corp

GENERAL DESCRIPTION OF THIS BUSINESS
Laser manufacturing

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:
06 / 30 / 14 _____ / _____ / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Corning Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Glass and optical fiber manufacturer

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: Duke Energy and Spectra Energy acquired upon termination & distribution of a testamentary family trust

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
Deborah A. Poochigian

NAME OF BUSINESS ENTITY
Cyberonics Corp.
GENERAL DESCRIPTION OF THIS BUSINESS
Medical device manufacturer
FAIR MARKET VALUE
NATURE OF INVESTMENT
IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY
Deere & Co.
GENERAL DESCRIPTION OF THIS BUSINESS
Equipment manufacturer
FAIR MARKET VALUE
NATURE OF INVESTMENT
IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY
First Energy Corp.
GENERAL DESCRIPTION OF THIS BUSINESS
Diversified Energy Company
FAIR MARKET VALUE
NATURE OF INVESTMENT
IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY
Ford Motor Company
GENERAL DESCRIPTION OF THIS BUSINESS
Automobile manufacturer
FAIR MARKET VALUE
NATURE OF INVESTMENT
IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY
Illumina Inc.
GENERAL DESCRIPTION OF THIS BUSINESS
Medical research and technology
FAIR MARKET VALUE
NATURE OF INVESTMENT
IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY
Material Sciences Corp.
GENERAL DESCRIPTION OF THIS BUSINESS
Coating materials and lamination company
FAIR MARKET VALUE
NATURE OF INVESTMENT
IF APPLICABLE, LIST DATE:

Comments:

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
Deborah A. Poochigian

NAME OF BUSINESS ENTITY: Quality Systems Inc.
GENERAL DESCRIPTION OF THIS BUSINESS: Healthcare information systems
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: 02/19/14

NAME OF BUSINESS ENTITY: Seadrill Ltd.
GENERAL DESCRIPTION OF THIS BUSINESS: Oil drilling and well services
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: 12/01/14

NAME OF BUSINESS ENTITY: Total S.A.
GENERAL DESCRIPTION OF THIS BUSINESS: Oil and gas company
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 14

NAME OF BUSINESS ENTITY: IBM
GENERAL DESCRIPTION OF THIS BUSINESS: Information technology
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 14

NAME OF BUSINESS ENTITY: GSF Sunnyside Clovis, L.P.
GENERAL DESCRIPTION OF THIS BUSINESS: Real estate limited partnership
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Other (real estate limited partner)
IF APPLICABLE, LIST DATE: / / 14

NAME OF BUSINESS ENTITY: Deran Koligian Farms L.P.
GENERAL DESCRIPTION OF THIS BUSINESS: Farming
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Partnership
IF APPLICABLE, LIST DATE: / / 14

Comments:

**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
Deborah A. Poochigian

▶ NAME OF BUSINESS ENTITY
Canberra Court Investors

GENERAL DESCRIPTION OF THIS BUSINESS
Real estate limited partnership

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

Name
 Deborah A. Poochigian

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 Deran Koligian Farms LP

ADDRESS (Business Address Acceptable)
 5636 W. Kearney Boulevard, Fresno, CA 93706

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Farming

YOUR BUSINESS POSITION
 Limited Partner

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
 Income from parcel reported on Schedule B
 (Describe)
 Other _____
 (Describe)

NAME OF SOURCE OF INCOME
 GSF Properties (Sage Stone)

ADDRESS (Business Address Acceptable)
 7355 N. Palm Avenue, Suite 105, Fresno, CA 93711

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Mgr. of limited partnership real property

YOUR BUSINESS POSITION
 Investor - Sunnyside Clovis limited partnership

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 Distribution - Ltd Partnership investment
 (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 OF SOURCE *(Not an Acronym)*
 Fresno State Alumni Association

ADDRESS *(Business Address Acceptable)*
 2625 E. Matoian Way Fresno, CA 93730

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Alumni Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 14 / 14	\$ 100.00	Game Merchandise
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
 The Big Fresno Fair

ADDRESS *(Business Address Acceptable)*
 1121 S. Chance Fresno, CA 93702

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 County Fair

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 17 / 14	\$ 50.00	Fair Tickets
09 / 24 / 14	\$ 25.00	Cinnamon Rolls
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
 Commercial Manufacturing

ADDRESS *(Business Address Acceptable)*
 2432 S. Railroad Fresno, CA 93706

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Equipment Manufacturer

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 25 / 14	\$ 200.00	Concert/Dinner Tickets
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: _____