

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

Date Initial Filing

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

Rice, Catherine Lloyd

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

Agency Name (Do not use acronyms)

COUNTY OF MARIN

Division, Board, Department, District, if applicable

Your Position

Board of Supervisors

Supervisor District 2

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

Agency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**
 State Judge or Court Commissioner (Statewide Jurisdiction) Multi-County \_\_\_\_\_ County of Marin City of \_\_\_\_\_ 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 **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one) The period covered is January 1, 2014, through the date of  
leaving office. **Assuming Office:** Date assumed 12 / 18 / 2014  
See attached 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: 4 **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.

I have used all reasonable diligence in preparing this statement. The information herein and in any attached schedules is true and complete. I acknowledge

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

Date Signed 03/24/2015

(month, day, year)

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
Expanded Statement Attachment**

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name  Catherine Lloyd Rice

Agency	Division/Board/Dept/District	Position	Type of Statement
COUNTY OF MARIN	Children and Families Commission	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	Housing Authority of Marin	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	Marin County Transit District	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	San Rafael Sanitation District	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	Transportation Authority of Marin	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	Gateway Improvement Authority	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	Gateway Refinancing Authority	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	Capital Improvements Financing Autho	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	Flood Control & Water Conservation	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	Open Space District	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	Mental Health Board	Member	Annual 1/1/2014 - 12/31/2014
COUNTY OF MARIN	FireSafe Marin	Member	Annual 1/1/2014 - 12/31/2014

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<b>CALIFORNIA FORM</b>	<b>700</b>
<small>FAIR POLITICAL PRACTICES COMMISSION</small>	
Name	
Catherine Lloyd Rice	

Agency	Division/Board/Dept/District	Position	Type of Statement
County of Marin	Association of Bay Area Governments	Alternate	Annual 1/1/2014 - 12/31/2014
County of Marin	Bay Area Air Quality Management District	Member	Assuming Office 12/18/2014

# SCHEDULE A-1 Investments

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

*Do not attach brokerage or financial statements.*

<b>CALIFORNIA FORM 700</b>
FAIR POLITICAL PRACTICES COMMISSION
Name <u>Rice, Catherine Lloyd</u>

▶ NAME OF BUSINESS ENTITY  
General Electric

GENERAL DESCRIPTION OF THIS BUSINESS  
Power

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:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Colgate-Palmolive

GENERAL DESCRIPTION OF THIS BUSINESS  
various

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:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Exxon Mobil

GENERAL DESCRIPTION OF THIS BUSINESS  
Energy

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:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 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)  
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 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 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

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 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

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IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                      DISPOSED

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