



STATEMENT OF ECONOMIC INTERESTS

RECEIVED FAIR POLITICAL PRACTICES COVER PAGE



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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) Salinas, Simon

1. Office, Agency, or Court

Agency Name (Do not use acronyms) Monterey County Board of Supervisors
Division, Board, Department, District, if applicable District 3
Your Position Supervisor

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
Multi-County XX
City of
Judge or Court Commissioner (Statewide Jurisdiction)
County of Monterey
Other

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

- Annual: The period covered is January 1, 2014, through December 31, 2014
Assuming Office: Date assumed
Candidate: Election Year
Leaving Office: Date Left
The period covered is January 1, 2014, through the date of leaving office.

4. Schedule Summary

- Check applicable schedules or "None."
Total number of pages including this cover page: 6
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

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 03/11/2015 (month, day, year)

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



CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Simon Salinas

Agency	Division/Board/Dept/District	Position	Type of Statement
Monterey County Board of Supervisors	District 3	Supervisor	Annual 1/1/2014 - 12/31/2014
Local Agency Formation Commission (LAFCO)	District 3	Board Member	Annual 1/1/2014 - 12/31/2014
Monterey County First 5	District 3	Board Member	Annual 1/1/2014 - 12/31/2014
Monterey Salinas Transit (MST)	District 3	Alternate Board Member	Annual 1/1/2014 - 12/31/2014
Salinas Valley Solid Waste Authority (SVSWA)	District 3	Alternate Board Member	Annual 1/1/2014 - 12/31/2014
Mtry Bay Unif. Air Poll. Cont. Dis. (MBUAPCD)	District 3	Board Member	Annual 1/1/2014 - 12/31/2014
Assoc. Mtry Bay Area Gov. (AMBAG)	District 3	Board Member	Annual 1/1/2014 - 12/31/2014
Transport. Agency for Mtry Co. (TAMC)	District 3	Board Member	Annual 1/1/2014 - 12/31/2014
Children's Council of Monterey County	District 3	Alternate Board Member	Annual 1/1/2014 - 12/31/2014
Monterey County Clerk Recorder	District 3	BOS	Annual 1/1/2014 - 12/31/2014
Carmel Valley County Sanitation Dist	District 3	BOS	Annual 1/1/2014 - 12/31/2014
Monterey County Redevelopment Agency	District 3	BOS	Annual 1/1/2014 - 12/31/2014

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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Simon Salinas

Agency	Division/Board/Dept/District	Position	Type of Statement
Moss Landing County Sanitation Dist.	District 3	BOS	Annual 1/1/2014 - 12/31/2014
Boronda County Sanitation District	District 3	BOS	Annual 1/1/2014 - 12/31/2014
Pajaro County Sanitation District	District 3	BOS	Annual 1/1/2014 - 12/31/2014
Monterey County Water Resource Agency	District 3	BOS	Annual 1/1/2014 - 12/31/2014
Fort Ord Reuse Authority, FORA	District 3	Alternate Board Member	Annual 1/1/2014 - 12/31/2014
Oversight Board/Successor	District 3	Board Member	Annual 1/1/2014 - 12/31/2014
Monterey County Health and Human Services Committee	District 3	Board Member	Annual 1/1/2014 - 12/31/2014
Emergency Communications Policy Advisory Council	District 3	Board Member	Annual 1/1/2014 - 12/31/2014
Monterey Regional Water Pollution Control Agency	District 3	Alternate Board Member	Annual 1/1/2014 - 12/31/2014

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1005 North Ohio Ave. Weslaco, TX 98596
 CITY
Weslaco

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 _____ DISPOSED _____

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Rental
 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
Cele Salinas

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
806 Howe Drive Salinas, CA 93907
 CITY
Salinas

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 _____ DISPOSED _____

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Rental
 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
Kathy Salinas

* 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 _____ TERM (Months/Years) _____
 _____% None

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 _____ TERM (Months/Years) _____
 _____% None

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

Comments: _____

SCHEDULE B

Interests in Real Property

(Including Rental Income)

Name

Salinas, Simon

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

629 Argentine Place Salinas, CA 93905

CITY

Salinas

FAIR MARKET VALUE

 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000

IF APPLICABLE, LIST DATE:

 _____ / _____ / _____
 ACQUIRED DISPOSED

NATURE OF INTEREST

 Ownership/Deed of Trust Easement Leasehold _____

Yrs. remaining

 Rental

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

Mr. & Mrs. Francisco Alvarez

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE

 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000

IF APPLICABLE, LIST DATE:

 _____ / _____ / _____
 ACQUIRED DISPOSED

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: _____

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Salinas, Simon

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE (Not an Acronym)
 Communities for Sustainable Monterey County
 ADDRESS (Business Address Acceptable)
 www.sustainablemontereycounty.org/
 Salinas, CA 93901

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 http://www.sustainablemontereycounty.org/
 No address provided, only a website

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 18 / 14	\$ 50.00	Book
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)
 California International Airshow
 ADDRESS (Business Address Acceptable)
 P.O. Box 1448
 Salinas, CA 93902

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Two Chalet/Chalets Tickets

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 24 / 14	\$ 150.00	Two VIP Tickets @ \$75.00
/ /	\$	
/ /	\$	

▶ 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)
/ /	\$	
/ /	\$	
/ /	\$	

▶ 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: _____