

STATEMENT OF ECONOMIC INTERESTS



COVER PAGE

RECEIVED Date Initial Filing

Received FEB 18 2015

IMPERIAL COUNTY REGISTRAR OF VOTERS

Please type or print in ink.

NAME OF FILER (LAST) TERRAZAS (FIRST) JESUS (MIDDLE) J.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

County of Imperial

County Supervisor

Division, Board, Department, District, if applicable

Your Position

District 2.

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

Agency: Imperial County Employees Retirement System

Position: Boardmember

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

- State, Multi-County, City of, Judge or Court Commissioner, County of Imperial, 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, The period covered is January 1, 2014, through the date of leaving office.

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4. Schedule Summary

Check applicable schedules or "None."

Total number of pages including this cover page: 4

- Schedule A-1, A-2, B, C, D, E, None - No reportable interests on any schedule

5. Verification

MA (B) DA (C) I h he

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

Date Signed 2-11-15 (month, day, year)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

Name
Jesus J. Terrazas

▶ 1. BUSINESS ENTITY OR TRUST

Name Jack Terrazas Insurance Agency
1744 Desert Gardens Dr. CA 92243
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Insurance Sales

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 IF APPLICABLE, LIST DATE: / / 14
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION owner/operator

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

None or Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 IF APPLICABLE, LIST DATE: / / 14
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold Yrs. remaining Other

Check box if additional schedules reporting investments or real property are attached

Comments: _____

▶ 1. BUSINESS ENTITY OR TRUST

Name
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 IF APPLICABLE, LIST DATE: / / 14
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

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None or Names listed below

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Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 IF APPLICABLE, LIST DATE: / / 14
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold Yrs. remaining Other

Check box if additional schedules reporting investments or real property are attached

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
Jesus J. Terrazas

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Brawley Union High School District

ADDRESS (Business Address Acceptable)
480 n. Imperial Av. Brawley, Ca
92227

BUSINESS ACTIVITY, IF ANY, OF SOURCE
High School

YOUR BUSINESS POSITION
Special Education Director / School Psychologist

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 _____
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
El Centro Elementary School District

ADDRESS (Business Address Acceptable)
1256 Broadway Av. El Centro, CA 92241

BUSINESS ACTIVITY, IF ANY, OF SOURCE
K-8 School District

YOUR BUSINESS POSITION
Boardmember (Trustee)

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 _____
 (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
Jesus "Jack" Terrazas

▶ NAME OF SOURCE (Not an Acronym)
Pinnacle Claims Management
 ADDRESS (Business Address Acceptable)
17620 Fitch Irvine, Ca.
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Claims management

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12, 10, 14</u>	<u>\$ 50-</u>	<u>Ear Pod.</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
San Diego Gas and Electric
 ADDRESS (Business Address Acceptable)
101 Ash St San Diego, Ca.
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Gas/Power supplier

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02, 07, 14</u>	<u>\$ 45⁰⁰</u>	<u>Round of Golf</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Tenaska
 ADDRESS (Business Address Acceptable)
1044 N. 115 St. Ste 400 Omaha, Nebraska
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Solar Plant Builder

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03, 13, 14</u>	<u>\$ 11²⁸</u>	<u>Paperweight</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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: _____