

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

RECEIVED  
Date Received  
MAR 14 2013  
BY PAGE 1 of 3  
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
MAGNUSON George ALEXANDER

1. Office, Agency, or Court

Agency Name  
City of Rocklin

Division, Board, Department, District, if applicable  
Rocklin City Council

Your Position  
Council member

► If filing for multiple positions, list below or on an attachment.

Agency: Rocklin Public Finance Agency - Director/Board Member  
Successory Agency to Rocklin Redevelopment Agency - Director/Board Member

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

- State
- Multi-County
- City of Rocklin
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of
- Other

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- Multi-County
- County of
- Other
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

- 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. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
3790 Rocklin Rd, Rocklin, CA 95677

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/12/13  
(month, day, year)

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

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
MAGNUSON George ALEXANDER

1. Office, Agency, or Court

Agency Name: WESTER PLACER Waste Management Authority  
Division, Board, Department, District, if applicable: J.P.A.  
Your Position: BOARD Member / Director

► If filing for multiple positions, list below or on an attachment.

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

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

- State  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of \_\_\_\_\_
- City of \_\_\_\_\_  Other J.P.A.

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- or-  The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2012.  The period covered is January 1, 2012, through the date of leaving office.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
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- Schedule A-1 - Investments - schedule attached  Schedule C - Income, Loans, & Business Positions - schedule attached
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- or-  None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
3970 Rocklin Rd., Rocklin CA 95677

DAYTIME TELEPHONE NUMBER ( [REDACTED] ) E-MAIL ADDRESS (OPTIONAL)

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

Cover page 3/3  
 Date Received  
 Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
MAGNUSON George Alexander

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

Agency Name  
State of California

Division, Board, Department, District, if applicable  
Department of Housing & Community Development - HCD Reg. II

Your Position  
HCD Reg. II

► If filing for multiple positions, list below or on an attachment.

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

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

- State
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is \_\_\_\_\_ through December 31, 2012.
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 (Business or Agency Address Recommended - Public Document)  
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I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/12/13  
 (month, day, year)

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



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

Name  
*George Alexander Magnus*

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
[REDACTED]

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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

\_\_\_\_\_

\_\_\_\_\_

▶ 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:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 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                                  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: \_\_\_\_\_