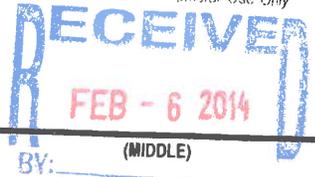


STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE # 1 of 3



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
MAGNUSON, GEORGE ALEXANDER

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Rocklin

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

Your Position
Councilmember

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Rocklin Public Finance Agency - Director / Board member
Agency: Successory Agency to the Rocklin
Resdevelopment Agency - Director / Board Member
Position:

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, 2013, through December 31, 2013.
-or-
The period covered is _____, through December 31, 2013.
- Leaving Office: Date Left _____
(Check one)
 - The period covered is January 1, 2013, through the date of leaving office.
 - The period covered is _____, through the date of leaving office.
- Assuming Office: Date assumed _____
- 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: _____
- 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
- or-
 None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE

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 2/6/2014
(month, day, year)

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

COVER PAGE # 2 of 3

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

WESTERN 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. (Do not use acronyms)

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 J.P.A.

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

- Annual: The period covered is January 1, 2013, through December 31, 2013.
- or-
- The period covered is _____, through December 31, 2013.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2013, through the date of leaving office.
- The period covered is _____, through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

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Total number of pages including this cover page: _____

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- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached
- or-
- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE



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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 2/6/2014 (month, day, year)

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

COVER PAGE # 3 of 3

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
State of California
Division, Board, Department, District, if applicable
Department of Housing and Community Development
Your Position
HCD REP - II

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 _____

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

- Annual: The period covered is January 1, 2013, through December 31, 2013. Leaving Office: Date Left ____/____/____
(Check one)
- or- The period covered is ____/____/____, through December 31, 2013. The period covered is January 1, 2013, through the date of leaving office.
- Assuming Office: Date assumed ____/____/____ 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: _____

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- Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached
- or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE



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Date Signed 2/6/2014
(month, day, year)

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

