

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Anderson, Amy Elin			

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

COUNTY OF MONTEREY

Division, Board, Department, District, if applicable

Your Position

Monterey Peninsula Water Management District

Director on Board

▶ 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, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction) Multi-County _____ County of Monterey City of _____ Other _____**3. Type of Statement (Check at least one box)** **Annual:** The period covered is January 1, 2022, through
December 31, 2022. **Leaving Office:** Date Left ____/____/____
(Check one circle.)

-or-

The period covered is ____/____/____, through
December 31, 2022. The period covered is January 1, 2022, through
the date of leaving office. **Assuming Office:** Date assumed 01 / 02 / 2023
See attached The period covered is ____/____/____, through the date
of leaving office. **Candidate:** Date of Election _____ and office sought, if different than Part 1: _____**4. Schedule Summary (required)**▶ Total number of pages including this cover page: 4**Schedules attached** **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. Verification**

MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
<i>(Business or Agency Address Recommended - Public Document)</i>				
25010 Outlook Dr		Carmel	CA	93923
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS			
(831) 626-4066	carmelcellogal@comcast.net			

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 03/06/2023
(month, day, year)Signature Amy Elin Anderson
(File the originally signed paper statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
Expanded Statement Attachment

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name
 Amy Elin Anderson

* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #
COUNTY OF MONTEREY	Monterey Peninsula Water Management District	Director on Board	Annual 1/1/2022 - 12/31/2022	01400073-NFH-0073
Assoc. of CA Water Agencies	Joint powers Insurance Authority	Representative	Assuming Office 1/2/2023	

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

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AMENDMENT

▶ 1. BUSINESS ENTITY OR TRUST

Somero-Anderson Trust Agreement, Dated June 26, 1989
Name
25010 Outlook Dr
Carmel, CA 93923-8960
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:

<input type="checkbox"/> \$0 - \$1,999			
<input type="checkbox"/> \$2,000 - \$10,000		___/___/22	___/___/22
<input type="checkbox"/> \$10,001 - \$100,000		ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000			
<input type="checkbox"/> 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

▶ 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

25010 Outlook Dr.
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

25010 Outlook Dr.
Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000			
<input type="checkbox"/> \$10,001 - \$100,000		___/___/22	___/___/22
<input type="checkbox"/> \$100,001 - \$1,000,000		ACQUIRED	DISPOSED
<input checked="" type="checkbox"/> 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:

Filer's Verification

Print Name Anderson, Amy Elin

Office, Agency or Court See Expanded Statement Attachment

Statement Type 2022/2023 Annual _____ Annual Assuming Leaving Candidate
(yr)

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

Date Signed 03/06/2023 Filer's Signature Amy Elin Anderson
(month, day, year)

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

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FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Jeanette & Jamison Tuitele Lewis
ADDRESS (Business Address Acceptable)
13 Elk Run
Monterey, CA, CA 93940
BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION
lender
GROSS INCOME RECEIVED [X] \$10,001 - \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED
[X] Loan repayment

NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION
GROSS INCOME RECEIVED [] No Income - Business Position Only
CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Comments:

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, 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.

NAME OF LENDER*
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE
TERM (Months/Years)
SECURITY FOR LOAN
HIGHEST BALANCE DURING REPORTING PERIOD

Filer's Verification

Print Name Anderson, Amy Elin Office, Agency or Court See Expanded Statement Attachment
Statement Type [X] 2022/2023 Annual [] Annual [] Assuming [] Leaving [] Candidate
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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date Signed 03/06/2023 Filer's Signature Amy Elin Anderson