

STATEMENT OF ECONOMIC INTERESTS

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POLITICAL PRACTICES COMMISSION Official Use Only

COVER PAGE

2018 APR -2 AM 9:47

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Pedroza Alfredo

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
Napa County  
Division, Board, Department, District, if applicable Your Position  
Board of Supervisors Supervisor, District 4

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

Agency: See attached list Position: \_\_\_\_\_

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

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

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

- Annual: The period covered is January 1, 2017, through December 31, 2017.  
-or-  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2017.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_
- Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)
  - The period covered is January 1, 2017, through the date of leaving office.
  - or-
  - The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 8

Schedules attached

- 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

## STATEMENT OF ECONOMIC INTERESTS

1. Office, Agency or Court Expanded List:

<u>Agency</u>	<u>Position</u>
Napa County Board of Supervisors	Board Member
Napa County Board of Equalization	Board Member
Silverado Community Services District	Board Member
Lake Berryessa Resort Improvement District	Board Member
Napa-Berryessa Resort Improvement District	Board Member
Monticello Public Cemetery District	Board Member
Napa County Public Improvement Corporation	Board Member
Napa County Housing Authority	Board Member
Napa County Flood Control & Water Conservation District	Board Member
Napa County Flood Protection & Watershed Improvement Authority	Board Member
In-Home Supportive Services Public Authority of Napa County	Board Member
Upper Valley Waste Management Agency	Member
Napa Valley Transportation Authority (NVTA)	Member
California State Association of Counties (CSAC) Administration of Justice Policy Committee	Member
Economic Development Policy Committee	Member
Napa-Lake Workforce Alliance	Board Member
Metropolitan Transportation Commission	Member
✓ Napa-Vallejo Waste Management Authority	Member
Napa Sanitation District	Alternate



**SCHEDULE A-1  
Investments**

**Stocks, Bonds, and Other Interests  
(Ownership Interest is Less Than 10%)**

*Do not attach brokerage or financial statements.*

<p><b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION</p> <p>Name <u>Alfredo Pedroza</u></p>
--

▶ NAME OF BUSINESS ENTITY  
Prudential Mutual Fund

GENERAL DESCRIPTION OF THIS BUSINESS  
Retirement

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

NATURE OF INVESTMENT  
 Stock       Other Mutual Fund  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:  
     /      / 17           /      / 17  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
\_\_\_\_\_

GENERAL DESCRIPTION OF THIS BUSINESS  
\_\_\_\_\_

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:  
     /      / 17           /      / 17  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
\_\_\_\_\_

GENERAL DESCRIPTION OF THIS BUSINESS  
\_\_\_\_\_

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:  
     /      / 17           /      / 17  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
\_\_\_\_\_

GENERAL DESCRIPTION OF THIS BUSINESS  
\_\_\_\_\_

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:  
     /      / 17           /      / 17  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
\_\_\_\_\_

GENERAL DESCRIPTION OF THIS BUSINESS  
\_\_\_\_\_

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:  
     /      / 17           /      / 17  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
\_\_\_\_\_

GENERAL DESCRIPTION OF THIS BUSINESS  
\_\_\_\_\_

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:  
     /      / 17           /      / 17  
 ACQUIRED                      DISPOSED

Comments: \_\_\_\_\_

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

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
Alfredo Pedroza

**▶ 1. BUSINESS ENTITY OR TRUST**

Alfredo Pedroza  
Name  
332 Troon Drive, Napa, CA 94558  
Address (Business Address Acceptable)  
Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Finance Banking, Investments

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000                            /      /17                            /      /17  
 \$10,001 - \$100,000                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     \_\_\_\_\_ Other

YOUR BUSINESS POSITION Sole Prop/Owner

**▶ 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  
Mechanics Bank, Pacific Hospitality Group

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

Check one box:  
 INVESTMENT                       REAL PROPERTY

Napa Franchise Ventures II, LLC  
Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property  
Commerical Development  
Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000                            /      /17                            /      /17  
 \$100,001 - \$1,000,000                      ACQUIRED                      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust                       Stock                       Partnership  
 Leasehold \_\_\_\_\_ Yrs. remaining                       Other Shares/Investor

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

**▶ 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  
 \$2,000 - \$10,000                            /      /17                            /      /17  
 \$10,001 - \$100,000                      ACQUIRED                      DISPOSED  
 \$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

**▶ 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

EET Napa, LLC  
Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property  
Restaurant  
Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000                            /      /17                            /      /17  
 \$100,001 - \$1,000,000                      ACQUIRED                      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust                       Stock                       Partnership  
 Leasehold \_\_\_\_\_ Yrs. remaining                       Other Shares/Investor

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

Comments: \_\_\_\_\_





**SCHEDULE D**  
**Income – Gifts**

Name  
 Alfredo Pedroza

▶ NAME OF SOURCE (Not an Acronym)  
 California Refuse Recycling Council Northern Dist

ADDRESS (Business Address Acceptable)  
 1121 L Street, Suite 505, Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Recycling

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 17 / 17	\$ 37.92	Trash Bash Reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
 Winegrowers of Napa County

ADDRESS (Business Address Acceptable)  
 P.O. Box 5937 Napa, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Trade organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 07 / 17	\$ 70.00	Annual Holiday Luncheon
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
 California Refuse Recycling Council Southern Dist

ADDRESS (Business Address Acceptable)  
 1851 East First Street, Suite 1220, Santa Ana, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Recycling

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 17 / 17	\$ 37.93	Trash Bash Reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
 Craig & Kathryn Hall

ADDRESS (Business Address Acceptable)  
 60 Auberge Road, Rutherford, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Winery Owners

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 23 / 17	\$ 120.00	Harvest dinner & wine
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
 Napa Valley Grapegrowers

ADDRESS (Business Address Acceptable)  
 1795 Third Street, Napa, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Trade organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 12 / 17	\$ 100.00	Annual dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
 First Street Napa Team

ADDRESS (Business Address Acceptable)  
 1300 First Street, Napa, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Redevelopment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 22 / 17	\$ 50.00	Gift Certificate to Eiko's
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
 Alfredo Pedroza

▶ NAME OF SOURCE *(Not an Acronym)*  
 Mi Sueno Winery

ADDRESS *(Business Address Acceptable)*  
 910 Enterprise Way, Napa CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Winery

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 22 / 17	\$ 200.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: \_\_\_\_\_