

City of Calistoga
November 5, 2024 Municipal Election
Candidate Information Sheet

Office:

MAYOR

Name:

DONALD WILLIAMS

Contact
Information:

dwilliams@calistogaca.gov
707-479-8660

- Candidate Statement of Qualifications (confidential until close of nomination period)
 Opted Out
- Statement of Economic Interests Form 700
- Code of Fair Campaign Practices
 Opted Out
- Candidate Intention Statement Form 501
- Campaign Disclosure Statements Form(s) (where applicable)
- 470 Officeholder/Candidate Campaign Statement Short Form
 470S Officeholder/Candidate Campaign Statement Supplement Form
 410 Statement of Organization Recipient Committee
 Additional Campaign Disclosure Forms for Recipient Committees

<https://public.netfile.com/pub2/?aid=CAL>

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A Public Document

Date Initial Filing Received
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CITY CLERK

1652882

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Williams, Donald A

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Calistoga
Division, Board, Department, District, if applicable
City Council
Your Position
Mayor

► 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
- City of Calistoga Other

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

- Annual: The period covered is January 1, 2023 through December 31, 2023. Leaving Office: Date Left / / (Check one circle)
- or- The period covered is / / , through December 31, 2023. The period covered is January 1, 2023 through the date of leaving office.
- Assuming Office: Date assumed / / The period covered is / / , through the date of leaving office.
- Candidate: Date of Election 11/5/2024 and office sought, if different than Part 1: mayor

4. Schedule Summary (required)

► Total number of pages including this cover page: 5

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
(Business or Agency Address Recommended - Public Document)
Calistoga CA 94515
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS

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 07/31/2024
(month, day, year)

Signature Donald A Williams
(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 Donald A Williams

* 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 #
City of Calistoga	City Council	Mayor		052000304-NFH-0304
City of Calistoga	Candidate	Mayor		052000304-NFH-0304

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 515 Washington Street
 CITY
 Calistoga

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

ACQUIRED / /23 DISPOSED / /23

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
 Carmen Mendoza
~~Paul Bloor~~ Carl Dene

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 1211 Gold/1703 Cedar
 CITY
 Calistoga

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

ACQUIRED / /23 DISPOSED / /23

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
~~Logan Bounsell~~ Alan Day
 Harini Oken

* You are not required to report loans from a commercial lending institution 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 _____% None TERM (Months/Years)
 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 _____% None TERM (Months/Years)
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments:

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name

Williams, Donald A

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

city of calistoga

ADDRESS (Business Address Acceptable)

1232 Washington Street

Calistoga, CA 94515

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED No Income - Business Position Only
 \$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 service on city council
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

city of calistoga

ADDRESS (Business Address Acceptable)

1232 Washington Street

Calistoga, CA 94515

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED No Income - Business Position Only
 \$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 service on city council
 (Describe)

▶ 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. 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 C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Williams, Donald A

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
rental property
ADDRESS (Business Address Acceptable)
515 Washington St 1703 Cedar St/1211 Gold St
Calistoga, CA 94515
BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION
owner
GROSS INCOME RECEIVED No Income - Business Position Only
 \$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
515 Washington St, 1211 Gold St/1703 Cedar St,
Calistoga CA
(Describe)
 Other _____
(Describe)

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
 \$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 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. 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: _____



California Secretary of State
CODE OF FAIR CAMPAIGN PRACTICES
 (Elections Code § 20440)

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 JUL 31 2024
 CITY CLERK

There are basic principles of decency, honesty, and fair play which every candidate for public office in the State of California has a moral obligation to observe and uphold in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional right to a free and untrammled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

- (1) I SHALL CONDUCT my campaign openly and publicly, discussing the issues as I see them, presenting my record and policies with sincerity and frankness, and criticizing without fear or favor the record and policies of my opponents or political parties that merit this criticism.
- (2) I SHALL NOT USE OR PERMIT the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or his or her personal or family life.
- (3) I SHALL NOT USE OR PERMIT any appeal to negative prejudice based on a candidate's actual or perceived race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, age, sexual orientation, sex, including gender identity, or any other characteristic set forth in Section 12940 of the Government Code, or association with another person who has any of the actual or perceived characteristics set forth in Section 12940 of the Government Code.
- (4) I SHALL NOT USE OR PERMIT any dishonest or unethical practice that tends to corrupt or undermine our American system of free elections, or that hampers or prevents the full and free expression of the will of the voters including acts intended to hinder or prevent any eligible person from registering to vote, enrolling to vote, or voting.
- (5) I SHALL NOT coerce election help or campaign contributions for myself or for any other candidate from my employees.
- (6) I SHALL IMMEDIATELY AND PUBLICLY REPUDIATE support deriving from any individual or group that resorts, on behalf of my candidacy or in opposition to that of my opponent, to the methods and tactics that I condemn. I shall accept responsibility to take firm action against any subordinate who violates any provision of this code or the laws governing elections.
- (7) I SHALL DEFEND AND UPHOLD the right of every qualified American voter to full and equal participation in the electoral process.

I, the undersigned, candidate for election to public office in the State of California or treasurer or chairperson of a committee making any independent expenditures, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct my campaign in accordance with the above principles and practices.

Donald W. Williams
 Print Name

Donald Williams
 Signature

July 31, 2024
 Date

mayor
 Office

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JUL 31 2024

CITY CLERK

Candidate Intention Statement

Check One: Initial Amendment (Explain) _____

Date Stamp	CALIFORNIA FORM 501
	For Official Use Only

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial) Williams	DAYTIME TELEPHONE NUMBER [REDACTED]	FAX NUMBER (optional) ()	EMAIL (optional)
STREET ADDRESS [REDACTED]	CITY Calistoga	STATE CA	ZIP CODE 94515
OFFICE SOUGHT (POSITION TITLE) mayor	AGENCY NAME city of Calistoga	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN OFFICE
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ (Name of Multi-County Jurisdiction)		2024 (Year of Election)	PARTY PREFERENCE: (Check one box, if applicable.) <input checked="" type="checkbox"/> PRIMARY / GENERAL <input type="checkbox"/> SPECIAL / RUNOFF

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

(Check one box)

- I accept the voluntary expenditure ceiling for the election stated above.
- I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

- I did not exceed the expenditure ceiling in the primary or special election held on ___/___/___ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

- On, ___/___/___ I contributed personal funds in excess of the expenditure ceiling for the election stated above.

3. Verification:

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

Executed on July 16th 2024
(month, day, year)

Signature Donald Williams
(Candidate)

**Officeholder and Candidate
Campaign Statement –
Short Form**

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JUL 31 2024

Date of election if applicable: (Month, Day, Year) 11/5/24	<input type="checkbox"/> Amendment (Explain Below) _____ _____	Date Stamp	CALIFORNIA FORM 470 For Official Use Only
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1. Statement Covers Calendar Year 20 24 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
 Donald Williams

STREET ADDRESS

CITY STATE ZIP CODE
 Calistoga CA 94515

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
 mayor

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
 City of Calistoga

4. Committee Information

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on July 16, 2024
 DATE

By Donald Williams
 SIGNATURE OF OFFICEHOLDER OR CANDIDATE