CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Received
Official Use Only

MAR 30 2011

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Samuelson	Joan	Ingeborg

1. Office, Agency, or Court

Agency Name
CIRM

Division, Board, Department, District, if applicable
ICOC

Your Position
ICOC Member

► 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 (Statewide Jurisdiction)
☐ County of _____
☐ Other _____

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

☒ **Annual:** The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is ___/___/___, through December 31, 2010.

☐ **Assuming Office:** Date ___/___/___

☐ **Candidate:** Election Year _____ Office sought, if different than Part 1: _____

☐ **Leaving Office:** Date Left ___/___/___
(Check one)

○ The period covered is January 1, 2010, 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:** 2

☒ **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 *(Business or Agency Address Recommended - Public Document)*	CITY	STATE	ZIP CODE
[redacted]	Healdsburg	CA	[redacted]

DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS
[redacted]	

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 th[redacted]

Date Signed March 30, 2011
(month, day, year)

Signature [redacted] *with your filing official.)*

SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____

► NAME OF BUSINESS ENTITY
Eastman Chemical Co

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Produces chemicals, fibers, plastics

FAIR MARKET VALUE
[X] $2,000 - $10,000 [ ] $10,001 - $100,000
[ ] $100,001 - $1,000,000 [ ] Over $1,000,000

NATURE OF INVESTMENT
[X] Stock [ ] Other _____ (Describe)
[ ] Partnership ○ Income Received of $0 - $499
○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:
01 / 29 / 10 ACQUIRED
/ / 10 DISPOSED

► NAME OF BUSINESS ENTITY
JP Morgan Chase & Co

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial Services

FAIR MARKET VALUE
[X] $2,000 - $10,000 [ ] $10,001 - $100,000
[ ] $100,001 - $1,000,000 [ ] Over $1,000,000

NATURE OF INVESTMENT
[X] Stock [ ] Other _____ (Describe)
[ ] Partnership ○ Income Received of $0 - $499
○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:
01 / 13 / 10 ACQUIRED
/ / 10 DISPOSED

► NAME OF BUSINESS ENTITY
Microsoft Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computer Products

FAIR MARKET VALUE
[X] $2,000 - $10,000 [ ] $10,001 - $100,000
[ ] $100,001 - $1,000,000 [ ] Over $1,000,000

NATURE OF INVESTMENT
[X] Stock [ ] Other _____ (Describe)
[ ] Partnership ○ Income Received of $0 - $499
○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:
01 / 13 / 10 ACQUIRED
/ / 10 DISPOSED

► NAME OF BUSINESS ENTITY
ALLIANCEBERNSTEIN

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Holding limited partnership unit

FAIR MARKET VALUE
[X] $2,000 - $10,000 [ ] $10,001 - $100,000
[ ] $100,001 - $1,000,000 [ ] Over $1,000,000

NATURE OF INVESTMENT
[ ] Stock [ ] Other _____ (Describe)
[X] Partnership ⊗ Income Received of $0 - $499
○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:
01 / 13 / 10 ACQUIRED
/ / 10 DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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
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GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
/ / 10 ACQUIRED
/ / 10 DISPOSED

Comments: _____