### RECEIVED

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

#### STATEMENT OF ECONOMIC INTERESTS

**COVER PAGE** 

MAR 1 2 2015 initial Filling A Received Official Use Only

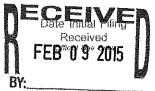
CITY OF OAKLEY

	Ple	ease type or print in ink.		
B	NAN	WE OF FILER (LAST)  Bands-Galvan	(FIRST) (MIDDLE)	
_	1.	Office, Agency, or Court		
		Agency Name (Do not use acronyms)  Division, Board, Department, District, if applicable,  Warder Soft	2 Program Coordin	ator
		If filling 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	☐ Judge or Court Commissioner (Statewide Jurisdiction)	
		Multi-County	County of	
		Exity of Oakley	Other	
	3.	Type of Statement (Check at least one box)		
		Annual: The period covered is January 1, 2014, through	Leaving Office: Date Left/	
		December 31, 2014.	(Check one)	
		The period covered is/, through December 31, 2014.	<ul> <li>The period covered is January 1, 2014, through the date of leaving office.</li> </ul>	
		Assuming Office: Date assumed/	O The period covered is/, through the date of leaving office.	
		Candidate: Election year and office sought, if d	ifferent 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 C - Income, Loans, & Business Positions - schedule attached	
			Schedule D - Income - Gifts - schedule attached  Schedule E - Income - Gifts - Travel Payments - schedule attached	
		Schedule B - Real Property - schedule attached	J Ochecule E - Income - Onto - Travol i Symonio - Schedule allachied	
		None - No reportable interes	ts on any schedule	
	5.	Verification		
		MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)  DAYTIME TELEPHONE NUMBER	STATE ZEP CODE  LOUIS CA OLUSIONE  E-MAIL ADDRESS  CHARLES CODE	
		1 have used all reasonable diligence in preparing this statement. I have review		dry
		herein and in any attached schedules is true and complete. I acknowledge the	his is a public document.	$\sim$
		I certify under penalty of perjury under the laws of the State of Californi	is that the foregoing is true and correct.	) a
		Date Signed 63/11/2015 Sig	gnature The the originally signed statement With your filing official.)	Ch
	_			

FPPC Form 700 (2014/2015) FPPC Advice Email: advice@fppc.ca.gov

FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE



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Bay	· ·		Janlelyn			)
1. Office, Agency, or Court						
	gency Name (Do not use ad	ronyms)				
_	City of Oakley	Noted to another the		V D'	•	
	ivision, Board, Department, D	лятист, іг арріісаріе		Your Position		
_	inance Department			Senior Acco	ountant	· · · · · · · · · · · · · · · · · · ·
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)						
Δ	gency:	•		Position:		
	gency.			FUSRIUII.		
2. J	urisdiction of Office	(Check at least one box	d)			
Г	State			☐ Judge or Cou	urt Commissioner (S	tatewide Jurisdiction)
_	 ] Multi-County			_	•	
	City of Oakley					
V	City of			Otner		
3. T	ype of Statement (c)	neck at least one box)				
V	Annual: The period cover	red is January 1, 2014, th	rough	☐ Leaving Off	ice: Date Left	
<b>L</b>	December 31, 2		<b>3</b>	(Check one)		
	The period cove December 31, 2	ered is/	, through	<ul><li>The period</li><li>leaving o</li></ul>		ry 1, 2014, through the date of
	Assuming Office: Date	assumed/			od covered is of leaving office.	J, through
	Candidate: Election year and office sought, if different than Part 1:					
4. S	Schedule Summary	aran da ang ang ang ang ang ang ang ang ang an			NAMES AND DESCRIPTION OF THE PROPERTY OF THE P	and constitution of the second
C	heck applicable sched	lules or "None."	► Total	number of pages	including this	cover page:
_	Schedule A-1 - Investmer	ıts – schedule attached	ı	Schedule C - Inco	me. Loans. & Busin	ess Positions - schedule attached
Ē	Schedule A-2 - Investmer				me – Gifts – sched	
	Schedule B - Real Prope	rty - schedule attached		Schedule E - Inco.	me – Gifts – Travel	Payments - schedule attached
			-or-			
		✓ None -	No reportable intere	sts on any schedule		
5. Ve	erification				\$\$555 20.555/155 252/21/25/51/1 de 43 455 460 a 400 a 40	
	AILING ADDRESS Susiness or Agency Address Recomm	TREET nended - Public Document)	CITY		STATE	ZIP CODE
3	3231 Main Street		Oakley	•	CA	94561
D/	AYTIME TELEPHONE NUMBER			E-MAIL ADDRESS		
(	925 ) 625-7014			bayona@ci.oakl		
i h	nave used all reasonable dilig erein and in any attached sch	ence in preparing this state nedules is true and comple	ement. I have revie ete. I acknowledge	wed this statement and this is a public docume	to the best of my kr ent.	nowledge the information contained
L	certify under penalty of per	jury under the laws of th	ne State of Califorr	ia that the foregoing	is true and correc	<b>L</b>
	oto Signad 02/09/2015			Cal		
Da	ate Signeu	onth, day, year)	<b>S</b> i	gnature	a the equipally signed states	cont with your filing official 1
	(#i	ones, uay, your		// (File	e the originally signed staten	rom wan your ming omeial.)

Date Signed

#### STATEMENT OF ECONOMIC INTERESTS

MAR 1 6 2015

#### COVER PAGE

Please type or print in ink. NAME OF FILER (LAST) (FIRST) Bermudez Heylin 1. Office, Agency, or Court Agency Name (Do not use acronyms) CITY OF OAKLEY Division, Board, Department, District, if applicable Your Position FINANCE DEPARTMENT SENIOR ACCOUNTING TECHNICIAN ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Position: \_ Agency: . 2. Jurisdiction of Office (Check at least one box) Judge or Court Commissioner (Statewide Jurisdiction) State County of \_ City of Oakley Other \_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2014, through Leaving Office: Date Left \_\_\_\_/\_\_\_ December 31, 2014. (Check one) O The period covered is January 1, 2014, through the date of The period covered is \_\_\_ leaving office. December 31, 2014. The period covered is \_\_\_\_ Assuming Office: Date assumed \_\_\_\_\_/\_\_\_/\_ the date of leaving office. Candidate: Election year \_ \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_ 4. Schedule Summary ▶ Total number of pages including this cover page: \_ Check applicable schedules or "None." Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached None - No reportable interests on any schedule 5. Verification STATE ZIP CODE (Business or Agency Address Recommended - Public Document) 3231 Main Street Oakley CA 94561 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (925)625-7018 bermudez@ci.aokely.ca.us 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 intrue-and-correct.

Signature.

(File the originally signed statement with your filing official.) FPPC Form 700 (2014/2015)

## STATEMENT OF ECONOMIC INTERESTS FEB 1 3 2015 Initial Filing

**COVER PAGE** 

CITY OF OAKLEY

Please type or print in ink.	
NAME OF FILER (LAST)	(FIRST) (MIDDLE)
BILLEGI, JEHRY JO	25ETH
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
CITY OF OAKLEY	
Division, Board, Department, District, if applicable	Your Position ASST. TO THE CHIEF
POLICE DELT	HSST. TO THE CHIEF
▶ 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	Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	County of
Acity of OFFICEY	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2014, through	Leaving Office: Date Left/
December 31, 2014.	(Check one)
The period covered is, through December 31, 2014.	<ul> <li>The period covered is January 1, 2014, through the date of leaving office.</li> </ul>
Assuming Office: Date assumed	The period covered is, through the date of leaving office.
Candidate: Election year and office sought, if of	lifferent than Part 1:
4. Schedule Summary	
	number of pages including this cover page:
Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-1 - 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 interes	sts on any schedule
5. Verification	
MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
3231 MAIN ST DAILEY	. CA 94561
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS
(945) 625 - 8825	
I have used all reasonable diligence in preparing this statement. I have review herein and in any attached schedules is true and complete. I acknowledge to	
I certify under penalty of perjury under the laws of the State of Californ	ia that the foregoing is true and correct.
× 2/13/15	12000
Date Signed Signed Signed	gnature



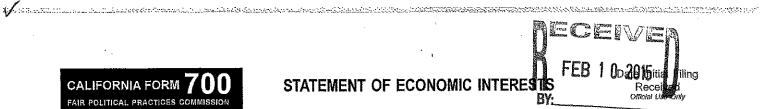
### STATEMENT OF ECONOMIC INTERESTS COVER PAGE

ริการสดงสามารถสองเหมือน <u>เพลาวรับสามารถสองสามารถส</u>องสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถ

Date Initial Filing
Received
Official Use Only

Please type or print in lnk. (MIDDLE) NAME OF FILER VUNC 1. Office, Agency, or Court Agency Name (Do not use acronyms Division, Board Department District, if app ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Position: . 2. Jurisdiction of Office (Check at least one box) ☐ Judge or Court Commissioner (Statewide Jurisdiction) ☐ State Multi-County County of ... City of Other. 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2014, through Leaving Office: Date Left \_\_\_ (Check one) December 31, 2014. O The period covered is January 1, 2014, through the date of The period covered is leaving office. December 31, 2014. O The period covered is \_ Assuming Office: Date assumed .... the date of leaving office. and office sought, if different than Part 1: ... Candidate: Election year ... 4. Schedule Summary ► Total number of pages including this cover page: -Check applicable schedules or "None." Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached -or-None - No reportable interests on any schedule 5. Verification STATE 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. Signature Date Signed \_

#### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**



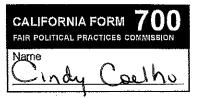
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riease type of	print in and		
NAME OF FILER	Coelho	(FIRST)	(MIDDLE)
1. Office, A	gency, or Court		
C	ne (Do not use acronyms)  Lucy of Oakley eard, Department, District, if applicable	Recreation & El	rent Coordinate
► If filing f	or multiple positions, list below or on an attachment.	(Do not use acronyms)	
Agency:		Position:	
2. Jurisdic	tion of Office (Check at least one box)		
State		Judge or Court Commissione	r (Statewide Jurisdiction)
	ounty	County of	
City of .	Dakley	Other	
3. Type of	Statement (Check at least one box)		
	I: The period covered is January 1, 2014, through December 31, 2014.	Leaving Office: Date Left (Check one)	
. <del>•</del> 0I	The period covered is	leaving office.	nuary 1, 2014, through the date of
Assum	ning Office: Date assumed/	O The period covered is the date of leaving office	through
☐ Candid	date: Election year and office		
ł	le Summary oplicable schedules or "None."	➤ Total number of pages including to	
Sched	ute A-1 - Investments — schedule attached ute A-2 - Investments — schedule attached ute B - Real Property — schedule attached	Schedule D - Income - Gifts - so Schedule E - Income - Gifts - Tr	Business Positions – schedule attached hedule attached avel Payments – schedule attached
		or- ortable interests on any schedule	
5. Verificat	ion		
MAILING ADD (Business or	DRESS STREET Agency Address Recommended - Public Document)	CITY STATE	ZIP CODE
DAYTIME TE	231 Main St O	akey MAIL ADDRESS	74561
l have use	d all reasonable diligence in preparing this statement. in any attached schedules is true and complete.	I have reviewed this statement and to the best of racknowledge this is a public document.	ny knowledge the information contained
	nder penalty of perjury under the laws of the Stat		rrect.
Date Sign	ed Feb 10 2015	Signature	Statement 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.



NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Real Estate Neutrut Fund FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000	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 O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
► NAME OF BUSINESS ENTITY	➤ NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE  \$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,000  \$100,000  \$100,001 - \$1,000,000  \$0ver \$1,000,000  NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE  \$2,000 - \$10,000	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 O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:

Comments:

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 7	
Name	

NAME OF SOURCE OF INCOME	► 1. INCOME RECEIVED
	NAME OF SOURCE OF INCOME
Michael Louis Celho  ADDRESS (Business Address Acceptable)	Well's Keal Estate nuestra  ADDRESS (Business Address Acceptable)
611 Heathow Dr Oakley BUSINESS ACTIVITY IF ANY, OF SOURCE	POBOX 219073 BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION  CROSS INCOME RECEIVED  \$500 - \$1,000	YOUR BUSINESS POSITION  Stockholde  GROSS INCOME RECEIVED  \$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, bost, etc.)	Sale of
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
	1 I — .
Other(Describe)	Other (Describe)
Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	(Describe)
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PET  * You are not required to report loans from commercial learning installment or credit card transaction, made in the members of the public without regard to your official st regular course of business must be disclosed as follows:	ending institutions, or any indebtedness created as part of a elender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PET  * You are not required to report loans from commercial learning installment or credit card transaction, made in the members of the public without regard to your official st regular course of business must be disclosed as follows:	ending institutions, or any indebtedness created as part of a elender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's vs:
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PET  * You are not required to report loans from commercial learner retail installment or credit card transaction, made in the members of the public without regard to your official st regular course of business must be disclosed as follow NAME OF LENDER*	ending institutions, or any indebtedness created as part of a elender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's vs:  INTEREST RATE  Wone  None
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER  * You are not required to report loans from commercial language of the public without regard to your official st regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	ending institutions, or any indebtedness created as part of a elender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's interest rate TERM (Months/Years)
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PET  * You are not required to report loans from commercial language of the public without regard to your official st regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	ending institutions, or any indebtedness created as part of a elender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's /s:  INTEREST RATE TERM (Months/Years)
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PET  * You are not required to report loans from commercial learning in the retail installment or credit card transaction, made in the members of the public without regard to your official st regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	ending institutions, or any indebtedness created as part of a elender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's /s:  INTEREST RATE TERM (Months/Years)
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER  * You are not required to report loans from commercial learning installment or credit card transaction, made in the members of the public without regard to your official st regular course of business must be disclosed as follow.  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD	ending institutions, or any indebtedness created as part of a celender's regular course of business on terms available to catus. Personal loans and loans received not in a lender's security For LOAN    None
* You are not required to report loans from commercial laretail installment or credit card transaction, made in the members of the public without regard to your official st regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	ending institutions, or any indebtedness created as part of a celender's regular course of business on terms available to catus. Personal loans and loans received not in a lender's security For LOAN    None
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER  * You are not required to report loans from commercial to retail installment or credit card transaction, made in the members of the public without regard to your official st regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD	ending institutions, or any indebtedness created as part of a elender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's vs:  INTEREST RATE TERM (Months/Years)
*You are not required to report loans from commercial learning retail installment or credit card transaction, made in the members of the public without regard to your official st regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD	(Describe)  RIOD  ending institutions, or any indebtedness created as part of a celender's regular course of business on terms available to catus. Personal loans and loans received not in a lender's vs:  INTEREST RATE TERM (Months/Years)  ———————————————————————————————————
* You are not required to report loans from commercial to retail installment or credit card transaction, made in the members of the public without regard to your official st regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	(Describe)  RIOD  ending institutions, or any indebtedness created as part of a celender's regular course of business on terms available to catus. Personal loans and loans received not in a lender's vs:  INTEREST RATE TERM (Months/Years)  ———————————————————————————————————

#### STATEMENT OF ECONOMIC INTERESTS

RECEIVE PLANT Filling
Received
Official Use Only

**COVER PAGE** 

MAR 2 5 2015

Please type or print in ink.					
NAME OF FILER (LAST)		(FIRST) CITY OF OANDLEEY			
Coggins	Keith	Alan			
1. Office, Agency, or Court					
Agency Name (Do not use acronyms)					
City of Oakley					
Division, Board, Department, District, if applicable	)	Your Position			
Public Works & Engineering		Senior Engineer			
➤ If filing for multiple positions, list below or on a	an attachment. (Do not use	acronyms)			
Agency: City of Oakley		Position: Storm Water Program Coordinator			
2. Jurisdiction of Office (Check at least of	one box)				
State		☐ Judge or Court Commissioner (Statewide Jurisdiction)			
Multi-County		County of			
•		Other			
City of		Outer			
3. Type of Statement (Check at least one	box)				
Annual: The period covered is January 1, 2 December 31, 2014.	2014, through	Leaving Office: Date Left//(Check one)			
The period covered is/ December 31, 2014.	/, through	<ul> <li>The period covered is January 1, 2014, through the date of leaving office.</li> </ul>			
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:			
Schedule Summary					
Check applicable schedules or "None." ► Total number of pages including this cover page: 2					
••	-	√ Schedule C - Income, Loans, & Business Positions – schedule attache			
Schedule A-1 - Investments – schedule atta		Schedule D - Income - Gifts - schedule attached			
Schedule B - Real Property – schedule atta		Schedule E - Income – Gifts – Travel Payments – schedule attached			
Schedule b • Rear Property – Schedule alla	-Or-				
	None - No reportable intere	sts on any schedule			
5. Verification					
MAILING ADDRESS STREET	CITY	STATE ZIP CODE			
(Business or Agency Address Recommended - Public Docume 3231 Main Street	Oakley	CA 94561			
DAYTIME TELEPHONE NUMBER	Oakiey	TE-MAIL ADDRESS			
( 925 ) 625-7155		coggins@ci.oakley.ca.us			
	this statement. I have revie	wed this statement and to the best of my knowledge the information contains			
I certify under penalty of perjury under the la					
02/25/2015		Latte ale Com			
Date Signed 03/23/2013	Si	ignature (File the originally signed statement with your file of official.)			

#### SCHEDULE C Income, Loans, & Business Positions

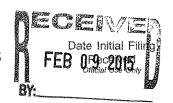
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Keith Alan Coggins

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED			
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME			
City of Oakley				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
3231 Main Street, Oakley, CA 94561				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
City Government				
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION			
Senior Engineer				
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED			
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000			
☐ \$10,001 - \$100,000	S10,001 - \$100,000 UVER \$100,000			
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED			
✓ Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)			
Sale of	Sale of			
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)			
Loan repayment				
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more			
(Describe)	(Describe)			
Other	Other			
(Describe)	(Describe)			
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a e lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's			
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)			
	% Попе			
ADDRESS (Business Address Acceptable)	0501007/5001011			
	SECURITY FOR LOAN			
BUSINESS ACTIVITY, IF ANY, OF LENDER	j None Personal residence			
	Real PropertyStreet address			
HIGHEST BALANCE DURING REPORTING PERIOD	oneer admess			
<b>\$500 - \$1,000</b>				
\$1,001 - \$10,000				
\$1,001 - \$10,000 \$10,001 - \$100,000	City			
	Guarantor			
\$10,001 - \$100,000	•			
\$10,001 - \$100,000	Guarantor			



## STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Ple	ase type or print in ink.				
NAI	ME OF FILER (LAST)		(FIRST)		(MIDDLE)
	Dalman		Dwayne		<u> </u>
1,	Office, Agency, or Court				
	Agency Name (Do not use acronyms)				<u></u>
	City of Oakley				
	Division, Board, Department, District, if applicable		Your Position		
	Economic Development		Economic Devel	opment I	Vlanager
	► If filing for multiple positions, list below or on an attachment	, (Do not u	se acronyms)		
	Agency:		Position:		
2.	Jurisdiction of Office (Check at least one box)				
	☐ State		☐ Judge or Court Comm	nissioner (S	tatewide Jurisdiction)
	Multi-County		County of		
	✓ City of Oakley				
	City of		Utner		
3.	Type of Statement (Check at least one box)				
	Annual: The period covered is January 1, 2014, through December 31, 2014.		Leaving Office: Date (Check one)	te Left	
	The period covered is 05 / 05 / 2014  December 31, 2014.	, through	,	ed is Janua	ry 1, 2014, through the date of
	Assuming Office: Date assumed/		The period cover the date of leavir		_/, through
	Candidate: Election year and off	ice sought, i	f different than Part 1:		<u>.                                    </u>
4	Schedule Summary			werzellizzweczenosa	
••	Check applicable schedules or "None."	➤ Tota	l number of pages inclu	ding this	cover page:
	Schedule A-1 - Investments – schedule attached		Schedule C - Income, Loa	ıns, & Busir	ness Positions – schedule attached
	Schedule A-2 - Investments - schedule attached		Schedule D - Income - G		
	Schedule B - Real Property - schedule attached		Schedule E - Income - G	ifts – Trave	Payments - schedule attached
		or-			
weeks to	✓ None - No rep	ortable inte	rests on any schedule	)222243344334422	
5.	Verification				
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY		STATE	ZIP CODE
	, , , , , , , , , , , , , , , , , , , ,	Oakley	С	Α	94561
	DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS		11.01.01.01.01.01.01.01.01.01.01.01.01.0
	( 925 ) 625-7006		dalman@ci.oakley.ca	.us	
	I have used all reasonable diligence in preparing this statement herein and in any attached schedules is true and complete. I			est of my k	nowledge the information contained
	I certify under penalty of perjury under the laws of the Sta	te of Califo	rnia that the foregoing is true	and correc	et.
			-lalic		
	Date Signed(month, day, year)		Signature	ally signed state	ment with your filing official.)

### RECEIVED

## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

(month, day, year)

### STATEMENT OF ECONOMIC INTERESTS

Date Initial Filin Received **R 0 4 2015**<sup>ficial Use Only</sup>

**COVER PAGE** Please type or print in ink. NAME OF FILER (LAST) (FIRST) Allan Edgell Troy 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Oakley Division, Board, Department, District, if applicable Your Position Code Enforcement Code Enforcement Coordinator ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: \_ 2. Jurisdiction of Office (Check at least one box) State Judge or Court Commissioner (Statewide Jurisdiction) ☐ Multi-County \_ County of \_\_\_\_\_ City of Oakley 3. Type of Statement (Check at least one box) ✓ Leaving Office: Date Left 12 , 12 , 2014 Annual: The period covered is January 1, 2014, through December 31, 2014. (Check one) -or-O The period covered is January 1, 2014, through the date of The period covered is \_\_\_\_\_\_, through leaving office. December 31, 2014. O The period covered is \_\_\_\_\_\_\_, through Assuming Office: Date assumed \_\_\_\_/\_\_\_/\_ the date of leaving office. \_\_\_\_\_ and office sought, if different than Part 1: \_\_ Candidate: Election year \_\_\_\_ 4. Schedule Summary ► Total number of pages including this cover page: \_\_\_ Check applicable schedules or "None." Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document) 3231 Main St DAYTIME TELEPHONE NUMBER edgell@ci.oakley.ca.us (*9*75) 625- 7009 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. Signature-

(File the originally signed statement 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
Edgell

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
CISCO	ORLY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
<b> </b> \$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Qver \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
FNBG	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000   \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership () Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 14 / / 14	. / / 14 / / 14
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
FORD	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
<b>₹</b> \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
() Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
·	•
Comments:	



(month, day, year)

### STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received MAR Highel Jose Only

Please type or print in ink. (FIRST) NAME OF FILER (LAST) Α Troy Edgell 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Oakley Division, Board, Department, District, if applicable Your Position Code Enforcement Manager ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: 2. Jurisdiction of Office (Check at least one box) Judge or Court Commissioner (Statewide Jurisdiction) State County of \_\_\_ ■ Multi-County \_ City of Oakley Other \_\_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2014, through Leaving Office: Date Left -(Check one) December 31, 2014. -or-O The period covered is January 1, 2014, through the date of The period covered is through leaving office. December 31, 2014. 2014 The period covered is \_ \_, through Assuming Office: Date assumed the date of leaving office. Candidate: Election year \_\_ and office sought, if different than Part 1: ... 4. Schedule Summary ► Total number of pages including this cover page: 2 Check applicable schedules or "None." 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) 94561 3231 Main Street CA Oakley E-MAIL ADDRESS DAYTIME TELEPHONE NUMBER (925)625-7009 edgell@ci.oakley.ca.us 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 03/03/2015 Signature

(File the originally signed statement 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 Edgell, Troy A.

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
CISCO	ORLY
GENERAL DESCRIPTION OF THIS BUSINESS	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)	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 O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 14 / 14 ACQUIRED DISPOSED	
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
FNBG GENERAL DESCRIPTION OF THIS BUSINESS	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  O Income Received of \$0 - \$499	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 O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: //	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY FORD	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	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	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 O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	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:	IF APPLICABLE, LIST DATE:
	/
Comments:	

### RECEIVED

#### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

### STATEMENT OF ECONOMIC INTERESTS MAR 0 3 20 Received 20

#### **COVER PAGE**

Please type or print in ink.

CITY OF OAKLEY

NAME OF FILER	(LAST)	(FIRST)		(MIDDLE)
¥;"	GOMEZ	DANIEL		José
1. Office, Agenc	y, or Court	•		
Agency Name (Do	not use acronyms)			
_ CITY O	partment, District, if applicable			
		Your Position	Ο.	
POLICE	L DIEPHOLIMIENT	CHIEF	OF POLICE	
► If filing for multi	ple positions, list below or on an attachment.	(Do not use acronyms)		
Agency:		Position:		
2. Jurisdiction	of Office (Check at least one box)			
State		☐ Judge or Cou	ırt Commissioner (Sta	stewide Jurisdiction)
Multi-County		County of		,
	LRY	•		
3. Type of State	ement (Check at least one box)		-	
Dece	period covered is January 1, 2014, through ember 31, 2014.	Leaving Off (Check one)	ice: Date Left	J
	period covered is// ember 31, 2014.	, through O The period leaving o		, 1, 2014, through the date of
Assuming Off	fice: Date assumed//		od covered isof leaving office.	/
Candidate: E	election year and office	e sought, if different than Part 1: $_{-}$		
4. Schedule Su	mmary			бого з бо в 1941 в п. синта вита вита по вита и подо и а извили домина от выста и плави усвори у врем. Роди
Check applica	ble schedules or "None."	► Total number of pages	including this o	cover page:
Schedule A-1	- Investments - schedule attached	Schedule C - Inco	me, Loans, & Busine	ss Positions - schedule attached
Schedule A-2	- Investments - schedule attached	Schedule D - Inco	me – Gifts – schedul	e attached
Schedule B -	Real Property - schedule attached	Schedule E - Inco	me – Gifts – Travel I	Payments – schedule attached
	-o None - <i>No repo</i>	r- rtable interests on any schedule		
5. Verification				
MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
(Business or Agency Ad 3231	Idress Recommended - Public Document)  MAIN STRE2T	2011/16V	CA	94561
DAYTIME TELEPHONE	NUMBER	CA14L/2Y E-MAIL ADDRESS		1130[
(925) 38	3-2374	GOMEZE	2 CI. OAKLZ	1. CA, US
	sonable diligence in preparing this statement. attached schedules is true and complete. I ad	I have reviewed this statement and	to the best of my kno	
I certify under pe	nalty of perjury under the laws of the State	of California that the foregoing	is true and correct.	
	7-7-3-01-1-	(,		
Date Signed	3-2-2015	Signature	le the originally bigned dateme	ant 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	► NAME OF BUSINESS ENTITY
SQUARE INC.	· ·
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FINANCE / COMMERCE	
	FAID MADIZET VALUE
FAIR MARKET VALUE  ☐ \$2,000 - \$10,000 <b>※</b> \$10,001 - \$100,000	FAIR MARKET VALUE  \$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT ☐ Stock ☑ Other NON QUALIFIKO STOCIL OFTIONS	NATURE OF INVESTMENT Stock Other
(Describe)  Partnership () Income Received of \$0 - \$499	(Describe)  Partnership () Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	FAIR MARKET VALUE
FAIR MARKET VALUE	FAIR MARKET VALUE  \$10,000
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 \$0ver \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$\ \$10,001 - \$1,000,000 \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\
στοι φτισοςσου στοι φτισοςσου	
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
○ Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
II ALLEGABLE, LIGHT BACK	
	<u> </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
OFNEDAL DECODIDATION OF THIS CHICKERS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
TAID MADVET VALUE	EATH MARKET VALUE
FAIR MARKET VALUE  \$10,001 - \$100,000  \$10,001 - \$100,000	FAIR MARKET VALUE  \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>.</u> .	
J 14 J 14	
ACQUIRED DISPOSED	ACQUIRED BIOFCORED
Comments:	

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

	LIFOR			7(0	0
Nar	ne	AL PRAC	HOES CC	OMMISSI	ON

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
SQUARE INC.	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1455 MARIKILT ST. SAN FRANCISCO CA	
1455 MARICILT ST. SAN FRANCISCO CA BUSINESS ACTIVITY, IF ANY, OF SOURCE 94103	BUSINESS ACTIVITY, IF ANY, OF SOURCE
FINANCE/COMMERCE	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
SECURITY OPERATIONS MANAGER	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000  \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership, For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other(Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	i i Riodennia de Santa Carlos de C
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a e lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's vs:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	·
<b>-</b>	City
\$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other
	(Describe)
Comments:	

# STATEMENT OF ECONOMIC INTERESTS 1 1 2015 Date Initial Filing Received Digital Use Only COVER PAGE BY:

Please type or print in Ink.

NIA	IE OF BUSD	// ADTS	(FIRST)	(MIDDLE)
МАЯ	IE OF FILER	GALSTAN	WILLIAM	R
1.	Office, Ager	ncy, or Court		
		(Do not use acronyms) ty of Oakley		
	***	Department, District, if applicable ity Altorney	Your Position Special Coun	sel
	▶ If filling for m	uitiple positions, list below or on an attachment.	(Do not use acronyms)	
	Agency:	ę.	Position:	
2,	Jurisdiction	n of Office (Check at least one box)		
	State		☐ Judge or Court Commissione	r (Statewide Jurisdiction)
	☐ Multi-County		County of	
	City of	akley	Aother Oakley Ove	15.ght board
3.	Type of Sta	stement (Check at least one box)		
		he period covered is January 1, 2014, through recember 31, 2014.	Leaving Office: Date Left _ (Check one)	1
	-Of-	he period covered is		nuary 1, 2014, through the date of
		lecember 31, 2014.	leaving office.	• • •
	Assuming	Office: Date assumed	O The period covered is the date of leaving office	through
	Candidate:	Election year and office	e sought, if different than Part 1:	***************************************
4.	Schedule S	Summary		Silvange province and the first one is somewhat an entirely enterprise the protection of the Committee of th
	Check appli	cable schedules or "None."	► Total number of pages including to	his cover page:
		A-1 - Investments - schedule attached	Schedule C - Income, Loens, & E	
	7	A-2 - Investments – schedule attached B - Real Property – schedule attached	Schedule D - Income - Gifts - so	hedule attached avel Payments – schedule attached
	octiculie (	-0		aror roymono dondado alaboroa
		☐ None - No repo	ortable interests on any schedule	
5.	Verification			
		STREET by Address Recommended - Public Document) Main St., Oakley	CITY STATE	74561
	DAYTIME TELEPHI (925) (	ONE NUMBER 025-7008	Cityattorney@ci.	
	I have used all herein and in a	reasonable diligence in preparing this statement.  ny attached schedules is true and complete. I a	I have reviewed this statement and to the best of recknowledge this is a public document.	ny knowledge the information contained
			e of California that the foregoing is true and co	rrect.
	Date Signed	2-9-15	Signature William R.	Geelstein
	Pare olytica	(month, day, year)	(File the originally signed	statement with your filing official.)

#### **SCHEDULE A-2** Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Calstan William

ACC	► 1. BUSINESS ENTITY OR TRUST
Office of William R. Galstan	
1440 Candolero Way, Antioch, CA	Name
Address (Business Address Acceptable) Q 46-39	Address (Business Address Acceptable)
Check one	Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
tan office	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999	\$0 - \$1,999
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION OWNER	YOUR BUSINESS POSITION
<ul> <li>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</li> </ul>	A ► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 ~ \$499 \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
S500 - \$1,000 OVER \$100,000	\$500 - \$1,000 DVER \$100,000
S1,001 - \$10,000	\$1,001 - \$10,000
S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 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	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below
None or Mames listed below  COTA COLE W.P	The state of the s
COLL WELL	
:	
◆ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	► 4, INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST	LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
	Property Ownership/Deed of Trust Stock Partnership
Property Ownership/Deed of Trust Stock Partnership	
Property Ownership/Deed of Trust Stock Partnership  Leasehold Trust Stock Partnership  Other	Leasehold Other

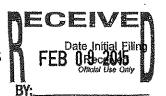
#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

california form 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Galstan, William

THE OF SOURCE OF MACANE	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
COTA COLE LLP	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2261 Lava Ridge Ct. Roseville, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Kirun	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
angulting Attorney	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 <b>\$1,001 - \$10,000</b>	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boal, etc.)	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or mo
Confinission of Remai modifie, ast each source of \$10,000 of more	COMMISSION OF TOPOGO STAIN
(Describe)	(Describe)
Mother Hersely Peers (Describe)	
V NOUIDI	Other
(= +==+,)	(Describe)
LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE      You are not required to report loans from commercial retail installment or credit card transaction, made in the	(Cescribe)  RIOD  lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to
LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE      You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official section.	inion lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's
LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE      You are not required to report loans from commercial retail installment or credit card transaction, made in the	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:
LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE      You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official section.	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official segular course of business must be disclosed as follows:	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official segular course of business must be disclosed as follows:	Coescribe)
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official segular course of business must be disclosed as follow NAME OF LENDER*	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:  INTEREST RATE TERM (Months/Years)
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official segular course of business must be disclosed as follow NAME OF LENDER*	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:  INTEREST RATE  None  None
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official segular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	Coescribe)   RIOD     Iending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:    INTEREST RATE   TERM (Months/Years)
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official segular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:  INTEREST RATE TERM (Months/Years)
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official segular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:  INTEREST RATE TERM (Months/Years)
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official sergular course of business must be disclosed as follown NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:  INTEREST RATE TERM (Months/Years)
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official sergular course of business must be disclosed as follown NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:  INTEREST RATE TERM (Months/Years)
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official sergular course of business must be disclosed as follown NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$10,001 - \$10,000	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:  INTEREST RATE TERM (Months/Years)  ———————————————————————————————————
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official sergular course of business must be disclosed as follown NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:  INTEREST RATE  TERM (Months/Years)  Whone  SECURITY FOR LOAN  None  Personal residence  Real Property  Street address

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Please type or print in ink. (MIDDLE) NAME OF FILER (LAST) (FIRST) uvne 1. Office, Agency, or Court Agency Name (Do not use acronyms) ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Position: .. 2. Jurisdiction of Office (Check at least one box) Judge or Court Commissioner (Statewide Jurisdiction) State County of .... Vicity of Oakley Other \_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2014, through Leaving Office; Date Left \_\_\_ December 31, 2014. (Check one) -or-O The period covered is January 1, 2014, through the date of The period covered is \_\_\_\_\_/\_\_\_\_, through leaving office. December 31, 2014. O The period covered is \_\_\_\_/\_\_\_ Assuming Office: Date assumed \_\_\_\_/\_ the date of leaving office. and office sought, if different than Part 1: \_ Candidate: Election year \_ 4. Schedule Summary ► Total number of pages including this cover page: Check applicable schedules or "None." Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached -or-None - No reportable interests on any schedule 5. Verification (Business or Agency Address Recommended - Public Document) 94561 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge\_like information contained herein and in any attached schedules is true and complete. I acknowledge this is a public documen I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Signature Date Signed ur filing official.)

#### **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

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Dean Hurney Access Inspection	
Dean Hurney Access Inspection 1612 S. Francisco Ct. Antioch CA 945	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one  Trust, go to 2  Business Entity, complete the box, then go to 2	Check one  Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999 \$2,000 - \$10,000 \$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 OWNEY	Over \$1,000,000  NATURE OF INVESTMENT Partnership Sole Proprietorship Other
<u> </u>	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
S0 - \$499	\$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  City of Oakley California	3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a deparate 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:	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:
INVESTMENT REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	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  \$100,001 - \$1,000,000  Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2014/2015) Sch. A-2

### RECEIVED

## STATEMENT OF ECONOMIC INTERESTS FEB 2 7 2015

Date Initial Filing Received Official Use Only

**COVER PAGE** 

Please type or print in ink.	CITY OF OAKI EV
Name of filer (LAST)  Kabalin Jason M	(FIRST) (Middle)
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)  City of Oakley  Division, Board, Department, District, if applicable  Public Works + Engineering	Your Position Assistant Associate Engineer
► 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	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	County of
Scity of Oalcley	Other
<del>9</del> 4310, 07	
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2014, through December 31, 2014.	Leaving Office: Date Left 12, 5, 2014 (Check one)
The period covered is/, through December 31, 2014.	<ul> <li>The period covered is January 1, 2014, through the date of leaving office.</li> </ul>
Assuming Office: Date assumed/	O The period covered is
Candidate: Election year and office sought, if d	ifferent than Part 1:
4. Schedule Summary	2
Check applicable schedules or "None." ➤ Total	number of pages including this cover page:
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 interes	ts on any schedule
5. Verification	
(925) 625-7040	STATE ZIP CODE  Ca 9456/ E-MAIL ADDRESS
I have used all reasonable diligence in preparing this statement. I have review herein and in any attached schedules is true and complete. I acknowledge the	nis is a public document.
I certify under penalty of perjury under the laws of the State of Californi	a that the foregoing is true and correct.
	mature Jasen Hahale
(month, day, year)	(File the originally signed statement 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 FAIR POLITICAL PRACTICES CO	
Name	

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Wow to Inc	
GENERAL DESCRIPTION OF THIS BUSINESS	
	GENERAL DESCRIPTION OF THIS BUSINESS
E-Book Space	
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 <b>※</b> (\$10,001 - \$100,000	
\$100,001 - \$1,000,000 Over \$1,000,000	
	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
O modifie Necestard of \$300 of More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	, , and a series of
" AT COABLE, CIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	///////
JIST OCES	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	THE ST DOGINEDO ENTIT
GENERAL DESCRIPTION OF THIS BUSINESS	
THIS BOSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
j	'
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	
S100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000
	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
O moonto received at \$500 of More (Report on Schedule C)	O income Received of \$500 or More (Report on Schedule C)
	,
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	" , " I statible, lib; DAIE.
//14/14 ACQUIRED DISPOSED	<u> </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	
NAME OF BOSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
1 1	CENTION OF THIS BUSINESS
_	•
FAIR MARKET VALUE	
——————————————————————————————————————	FAIR MARKET VALUE
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	
Stock Other	NATURE OF INVESTMENT
(Describe)	Stock Other
Partnership O Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
<b>[ ]</b>	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	· A · · EIGHDEE, EIGT DATE.
	// 14 / / 14
ACQUIRED DISPOSED	ACQUIRED DISPOSED
11	VVND
Comments:	

# SCHEDULE CIncome, Loans, & BusinessPositions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	

PICOME DECENTED	▶ 1. INCOME RECEIVED
I. INCOME RECEIVED	NAME OF SOURCE OF INCOME
Cide of Oakley	Canlson, Barbee + Gibson
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)  2633 Camino Ramon, Ste. 850 9455
3231 Main St Daldey, Ca 94561 BUSINESS ACTIVITY, IF ANY, OF SOURCE	2633 Camino Kamon, Ste. 880 9483
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Evenneer Met	YOUR BUSINESS POSITION
YOUR BUSINESS POSITION	11 ~ /
Acominto Engineer	Project Engineer
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
GROSS INCOME RECEIVED  \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Spouse's or registered domestic partner's income
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of(Real property, car, boat, etc.)
(Real property, car, bost, etc.)	Loan repayment
Loan repayment	Commission or Rental Income, list each source of \$10,000 or more
Commission or Rental Income, list each source of \$10,000 or more	Collegission of
	(Describe)
(Describe)	(Describe)
Other	(Describe)
Other (Describe)	Other (Describe)
Other	ial lending institutions, or any indebtedness created as part of an the lender's regular course of business on terms available to al status. Personal loans and loans received not in a lender's
Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  * You are not required to report loans from commercive retail installment or credit card transaction, made in mambers of the public without regard to your official.	Other (Describe)  ial lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to al status. Personal loans and loans received not in a lender's ollows:  INTEREST RATE TERM (Months/Years)
* You are not required to report loans from commercine retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as for NAME OF LENDER*	Other (Describe)  ial lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to al status. Personal loans and loans received not in a lender's ollows:
Other	Other (Describe)  ial lending institutions, or any indebtedness created as part of a nother lender's regular course of business on terms available to all status. Personal loans and loans received not in a lender's ollows:  INTEREST RATE  TERM (Months/Years)  None  SECURITY FOR LOAN
<ul> <li>Other</li></ul>	Other (Describe)  ial lending institutions, or any indebtedness created as part of a nother lender's regular course of business on terms available to all status. Personal loans and loans received not in a lender's ollows:  INTEREST RATE  TERM (Months/Years)  None
* You are not required to report loans from commercine retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as for NAME OF LENDER*	Other
<ul> <li>Other</li></ul>	Other (Describe)  ial lending institutions, or any indebtedness created as part of a nother lender's regular course of business on terms available to all status. Personal loans and loans received not in a lender's obliows:  INTEREST RATE  None  SECURITY FOR LOAN
<ul> <li>Other</li></ul>	Other

# RECEIVED Date Initial File

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

Please type or print in ink.

### STATEMENT OF ECONOMIC INTERESTS 2 7 2015 Received Official Use Only

**COVER PAGE** 

CITY OF OAKLEY

NAME OF FILER (LAST)	(FIRST)
Kabalin Jason M	
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
City of Oakley	
Division, Board, Department, District, if applicable	Your Position
Lublic Works + Engineering	Associate Engineer
▶ If filing for multiple positions, list below or on an attachment. (Do not u	
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	County of
Scity of Oak ley	Other
<i>y</i>	
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2014, through December 31, 2014.	Leaving Office: Date Left/(Check one)
The period covered is/, through December 31, 2014.	<ul> <li>The period covered is January 1, 2014, through the date of leaving office.</li> </ul>
Assuming Office: Date assumed 17 / 5 / 2014	O The period covered is/
Candidate: Election year and office sought, in	f different than Part 1;
4. Schedule Summary	0
Check applicable schedules or "None." ► Tota	I number of pages including this cover page:
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 inter	ests on any schedule
5. Verification	
MAILING ADDRESS STREET CITY	STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)	. Ca 94561
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS
(975) 625-7040	
I have used all reasonable diligence in preparing this statement. I have review herein and in any attached schedules is true and complete. I acknowledge	ewed this statement and to the best of my knowledge the information contained this is a public document.
I certify under penalty of perjury under the laws of the State of Califor	nia that the foregoing is true and correct
Date Signed 2/27/15	signature Jasen Karba
(month, day, year)	(File the originally signed statement 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	
Wow to Inc	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
E-Book Space	The Bookless
FAIR MARKET VALUE	FAIR MARKET WALL
\$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000
NATURE OF INVESTMENT	
Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//	// 14 / / 14
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
CENERAL PERSONNEL	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	, ·
FAIR MARKET VALUE	FAID MADURE AND A STATE OF THE
\$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$100,000 \$100,000 \$100,000 \$100,000 \$100,000
NATURE OF INVESTMENT	
Stock Other	NATURE OF INVESTMENT
(Describe) Partnership () Income Received of \$0 - \$499	Stock Other (Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
	O income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//_14//14	
ACQUIRED DISPOSED	
NAME OF BUSINESS ENTITY	
James of Boomeso EMITT	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	CENEDAL DECOMPOSITION
	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	
\$2,000 - \$10,000 \$10,000	FAIR MARKET VALUE
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000
<u> </u>	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT
(Describe)	Stock Other
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499
I 1	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments	
Comments:	

# SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM	
Name	

ME OF SOURCE OF INCOME	
$\alpha \cdot A = \Omega \cdot A + A + A + A + A + A + A + A + A + A$	NAME OF SOURCE OF INCOME
City of Valley	Carlson, Barbee + Gibson
DDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)  Can Kan
3231 Main St Dalley, Ca 9456/	ADDRESS (Business Address Acceptable)  2633 Camino Ramon, Ste. 350 9458: BUSINESS ACTIVITY, IF ANY, OF SOURCE
JSINESS ACTIVITY, IF ANY, OF SOURCE	
Engineerly	YOUR BUSINESS POSITION
OUR BUSINESS POSITION	Project Engineer
Associate Engineer	
ROSS INCOME RECEIVED	GROSS INCOME RECEIVED  \$500 - \$1,000 \$1,001 - \$10,000
\$500 - \$1,000 \$1,001 - \$10,000	\$10,001 - \$100,000 OVER \$100,000
\$10,001 - \$100,000 OVER \$100,000	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
ONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income	Snouse's or registered domestic partner's Income
Salary Spouse's or registered domestic parties a mount of the Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	Loan repayment
Loan repayment	
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source or \$10,000 or more
(Describe)	(Describe)
_	Other(Describe)
Other(Describe)	
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING	PERIOD
	- Use ding institutions or any indebtedness created as part of a
* You are not required to report loans from commercia	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to I status. Personal loans and loans received not in a lender's
You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to I status. Personal loans and loans received not in a lender's
You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as fol	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to a status. Personal loans and loans received not in a lender's flows:
You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as fol	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to il status. Personal loans and loans received not in a lender's flows:  INTEREST RATE  None  None
You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as fol NAME OF LENDER*	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to il status. Personal loans and loans received not in a lender's llows:  INTEREST RATE  Mone  SECURITY FOR LOAN
You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as fol NAME OF LENDER*	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to il status. Personal loans and loans received not in a lender's flows:  INTEREST RATE  None  None
* You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as fol NAME OF LENDER*  ADDRESS (Business Address Acceptable)	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to il status. Personal loans and loans received not in a lender's llows:    INTEREST RATE   TERM (Months/Years)
* You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as fol NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to il status. Personal loans and loans received not in a lender's llows:  INTEREST RATE  TERM (Months/Years)  Mone  SECURITY FOR LOAN  Personal residence
* You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as fol NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to il status. Personal loans and loans received not in a lender's llows:    INTEREST RATE   TERM (Months/Years)
* You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed to your official regular course of business acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to il status. Personal loans and loans received not in a lender's llows:  INTEREST RATE  TERM (Months/Years)  Mone  SECURITY FOR LOAN  None  Personal residence  Real Property  Street address  City
* You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed as followed the public without regard to your official regular course of business must be disclosed as followed to the public without regard to your official regular course of business must be disclosed as followed to the public without regard to your official regular course of business must be disclosed as followed to the public without regard to your official regular course of business must be disclosed as followed to your official regular course of business must be disclosed as followed to your official regular course of business must be disclosed as followed to your official regular course of business must be disclosed as followed to your official regular course of business must be disclosed as followed to your official regular course of business must be disclosed as followed to your official regular course of business must be disclosed as followed to your official regular course of business acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to il status. Personal loans and loans received not in a lender's llows:  INTEREST RATE  TERM (Months/Years)  Mone  SECURITY FOR LOAN  None  Personal residence  Real Property  Street address
* You are not required to report loans from commercial retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed the public without regard to your official regular course of business must be disclosed as followed to your official regular course of business acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	al lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to il status. Personal loans and loans received not in a lender's llows:  INTEREST RATE  TERM (Months/Years)  Mone  SECURITY FOR LOAN  None  Personal residence  Real Property  Street address  City

### RECEI

### STATEMENT OF ECONOMIC INTERESTS FEB 2 7 2015 **COVER PAGE**

Received
Official Use Only

Please type or print in ink.

	The state of the s
NAME OF FILER (LAST)	(FIRST)
Kabalin Jason M 1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
City of Oakley	
Division, Board, Department, District, if applicable	Your Position
Public Works + Engineering	Associate Engineer
▶ If filing for multiple positions, list below or on an attachment. (Do not us	e acronyms)
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	County of
Scity of Oak ley	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2014, through December 31, 2014.	Leaving Office: Date Left
The period covered is/, through December 31, 2014.	<ul> <li>The period covered is January 1, 2014, through the date of leaving office.</li> </ul>
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	2
	I number of pages including this cover page:
	Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule A-2 - Investments — schedule attached ☐ Schedule B - Real Property — schedule attached	<ul> <li>☐ Schedule D - Income - Gifts - schedule attached</li> <li>☐ Schedule E - Income - Gifts - Travel Payments - schedule attached</li> </ul>
-or-	
☐ None - No reportable intere	ests on any schedule
5. Verification	
MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
DAYTIME TELEPHONE NUMBER DAKIEY	. Ca 9456/
(925) 625-7040	
I have used all reasonable diligence in preparing this statement. I have revie herein and in any attached schedules is true and complete. I acknowledge	ewed this statement and to the best of my knowledge the information contained this is a public document.
I certify under penalty of perjury under the laws of the State of Californ	nia that the foregoing is true and correct.
Date Signed 2/27/15 s	ignature Jaser Kehan
(month, day, year)	(File the originally signed statement 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	► NAME OF BUSINESS ENTITY
Wow to Inc	INAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	OF UTD 11 And 12
_	GENERAL DESCRIPTION OF THIS BUSINESS
E-Book Space	
FAIR MARKET VALUE	
\$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000
	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other
Partnership O Income Received of \$0 - \$499	(Describa)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
The state of the s	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 14 / / 14	" AFFLICABLE, LIST DATE:
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	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
<u></u> ,	The state of Education Civility
GENERAL DESCRIPTION OF THIS BUSINESS	OF VERNI DESCRIPTION OF THE PROPERTY OF THE PR
	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	
\$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000
<u> </u>	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
the state of the s	O income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	
THE TANKE, EIGH DAIE.	IF APPLICABLE, LIST DATE:
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ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF PARTY	DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	OENERAL DESCRIPTION OF THIS BUSINESS
	·
FAIR MARKET VALUE	CAID HADIUT VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000
<b>j</b>	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
·	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	" A LIVADLE, LIST DATE;
///	//_14/ 14
ACQUIRED DISPOSED	ACQUIRED DISPOSED
11	···
Ommonto	

# SCHEDULE CIncome, Loans, & BusinessPositions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM	
FAIR POLITICAL PRACTICES CO	MMISSION
Name	

1. INCOME RECEIVED  NAME OF SOURCE OF INCOME	► 1. INCOME RECEIVED
	NAME OF SOURCE OF INCOME
City of Valley	Canlson, Barbel + Gibson  ADDRESS (Business Address Acceptable)  San Range
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)  2633 Camino Ramen, Ste. 350 94583
3231 Main St, Oakley, Ca 9456/	2633 Campo Kamon, Ste. 000 99583
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Engineering	YOUR BUSINESS POSITION
YOUR BUSINESS POSITION	Project Engineer
Associate Engineer	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED   \$1,001 - \$10,000
\$500 - \$1,000 \$1,001 - \$10,000	\$10,001 - \$100,000 \$\times \text{OVER \$100,000}
\$10,001 - \$100,000 OVER \$100,000	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income	Spouse's or registered domestic partner's income
Salary Spouse's or registered domestic parties a moonie (For self-employed use Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, does, etc.)	Loan repayment
Loan repayment	Commission or Rental Income, list each source of \$10,000 or more
Commission or Rental Income, list each source of \$10,000 or more	
(Describe)	(Describe)
Other	Other(Describe)
(Describe)	
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE	to in the state of any indebtedness created as part of a
	lending institutions, or any indebtedness created as part of a e lender's regular course of business on terms available to
members of the public without regard to your official s	tatus. Personal loans and loans reserved
members of the public without regard to your official s regular course of business must be disclosed as follow	NS:
members of the public without regard to your official s	tatus. Personal loans and loans reserved
members of the public without regard to your official s regular course of business must be disclosed as follow NAME OF LENDER*	NS:
members of the public without regard to your official s regular course of business must be disclosed as follow	INTEREST RATE TERM (Months/Years)
members of the public without regard to your official s regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	INTEREST RATE TERM (Months/Years)
members of the public without regard to your official s regular course of business must be disclosed as follow NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
members of the public without regard to your official s regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	INTEREST RATE TERM (Months/Years)
members of the public without regard to your official s regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	INTEREST RATE TERM (Months/Years)
members of the public without regard to your official's regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	INTEREST RATE TERM (Months/Years)
members of the public without regard to your official's regular course of business must be disclosed as folion NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD	INTEREST RATE TERM (Months/Years)
members of the public without regard to your official's regular course of business must be disclosed as folion NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	INTEREST RATE TERM (Months/Years)

### CALIFORNIA FORM

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

#### **COVER PAGE**

FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

Please type or print in link.	
NAME OF FILER (LAST) Kennedy Fra	ncis Joseph
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	/ / (
City of Oakley	City Surveyor
Division, Board, Department, District, if applicable	Your Position /
► If filing for multiple positions, list below or on an attachment. (Do not us	ise acronyms)
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
☐ State	Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	County of
Xity of Oakley	Other
2. Time of Chatemant (c)	
3. Type of Statement (Check at least one box)	Leaving Office: Date Left/
Annual: The period covered is January 1, 2014, through December 31, 2014.	(Check one)
The period covered is/, through December 31, 2014.	<ul> <li>The period covered is January 1, 2014, through the date of leaving office.</li> </ul>
Assuming Office: Date assumed	O The period covered is/, through the date of leaving office,
Candidate: Election year and office sought,	if different than Part 1:
4. Schedule Summary	al number of pages including this cover page:
Check applicable schedules or "None." ► Tot	
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached  Schedule D - Income – Gifts – schedule attached
☐ Schedule A-2 - Investments — schedule attached ☐ Schedule B - Real Property — schedule attached	Schedule E • Income – Gifts – Travel Payments – schedule attached
-or-	
None - No reportable inte	erests on any schedule
5. Verification	
MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)  3231 Main Street Oa	lula, A 9956/
DAYTIME TELEPHONE NUMBER (925) 625 7037	Kennedy (Oci, aakley.ca.us
herein and in any attached schedules is true and complete. I acknowledge	
I certify under penalty of perjury under the laws of the State of Calif	ornia that the foregoing is frue and correct.
2/28/15	Hterried
Date Signed (month, day, year)	Signature(Fig the originally signed stylement with your filing official.)
	FDDC F 200 /301 4/2010



Please type or print in ink.

### STATEMENT OF ECONOMIC INTERESTS

Received MAR 2 3 2015 Use Only

#### **COVER PAGE**

NAME OF FILER (LAST) (FIRST) MARQUEZ-SUAREZ NANCY **ANGELICA** 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Oakley Division, Board, Department, District, if applicable Your Position Administration-City Manager's Office Assistant to the City Manager/HR Manager ▶ 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 ☐ Judge or Court Commissioner (Statewide Jurisdiction) ■ Multi-County \_ County of \_\_ City of Oakley Other \_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2014, through Leaving Office: Date Left \_\_\_\_/\_\_\_ December 31, 2014. (Check one) -01-O The period covered is January 1, 2014, through the date of The period covered is \_\_\_\_/\_\_\_ December 31, 2014. leaving office. Assuming Office: Date assumed \_\_\_\_/\_\_/ O The period covered is \_\_\_\_ the date of leaving office. Candidate: Election year \_ \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_ 4. Schedule Summary ► Total number of pages including this cover page: \_ Check applicable schedules or "None." 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 ✓ None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) 3231 Main St Oakley CA 94561 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (925) 550-9517 marquez@ci.oakley.ca.us 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 03/23/2015 Signature (month, day, year)



## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing FEB 2 3 20 Page 1990

Please type or print in ink.			CIT	YOFOAKLI
NAME OF FILER (LAST)		(FIRST)		(MIDDLE)
McMurray	Joshua			Aaron
I. Office, Agency, or Court				
Agency Name (Do not use acronyms)				
City of Oakley				
Division, Board, Department, District, if applicable		Your Position		
Planning Division		Senior Planne	r/Housing a	nd Economic Dev. Analys
▶ If filing for multiple positions, list below or on an attachm	nent. (Do not use	acronyms)		
Agency:		Position:		
. Jurisdiction of Office (Check at least one box)				
☐ State		UJudge or Court C	Commissioner (S	tatewide Jurisdiction)
☐ Multi-County				
☑ City of Oakley		_ ′		
3. Type of Statement (Check at least one box)				
Annual: The period covered is January 1, 2014, throu December 31, 2014.	gh	Leaving Office:	Date Left02	2 , 19 , 2015
The period covered is//	, through	,		ry 1, 2014, through the date of
Assuming Office: Date assumed//		The period of the date of the date.		, through
Candidate: Election year and	office sought, if d	ifferent than Part 1:		
. Schedule Summary	<u> </u>			
Check applicable schedules or "None."	► Total	number of pages in	cluding this	cover page: 1
Schedule A-1 - Investments - schedule attached	Γ	Schedule C - Income,	Loans, & Busin	ess Positions – schedule attache
Schedule A-2 - Investments - schedule attached	<u>-</u>	Schedule D - Income	•	
Schedule B - Real Property - schedule attached				Payments - schedule attached
<b></b>	-01-			
	reportable interes	ts on any schedule		
. Verification  MAILING ADDRESS STREET	OIT!		OTATE	770 0000
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY		STATE	ZIP CODE
3231 Main Street	Oakley	•	CA	94561
DAYTIME TELEPHONE NUMBER	, "	E-MAIL ADDRESS		
( 925 ) 625-7004				
I have used all reasonable diligence in preparing this statement herein and in any attached schedules is true and complete.	ent. I have review I acknowledge th	ed this statement and to t is is a public document.	he best of my kr	nowledge the information containe
I certify under penalty of perjury under the laws of the S	<del>-</del>	•	rue and correct	t.
Date Signed 2/23/1	Sia	nature		
(month, day, year)	₹.9		originally signed staten	pent with your filing official \



/ (month, day, year)

### STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing FEB 2 Research

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Please type or print in ink.	•				ITYOF	)AKL
NAME OF FILER	(LAST)		(FIRST)	9 Kin 1	(MIDDLE	
McMurray		Joshua			Aaron	
l. Office, Agency, or	Court					
Agency Name (Do not us	se acronyms)					
City of Oakley						
Division, Board, Departme	ent, District, if applicable		Your Position			
Planning Division			Planning Ma	anager		
► If filing for multiple pos	sitions, list below or on an attacl	hment. (Do not use	acronyms)			
Agency:			Position:	1844 a		
. Jurisdiction of Of	fice (Check at least one box)	<del></del> )				
State			☐ Judge or Cou	rt Commissioner (	Statewide Jurisdiction)	
Multi-County			County of			
•						
w Oily Oi						
. Type of Statement	t (Check at least one box)					
	covered is January 1, 2014, thr	rough		ce: Date Left		
December 3	31, 2014.		(Check one)			
The period December 3			<ul><li>The period</li><li>leaving of</li></ul>		ary 1, 2014, through t	he date of
✓ Assuming Office: £	Date assumed 02 / 20 /	2015		od covered is of leaving office.		_, through
Candidate: Election	year a	and office sought, if d	ifferent than Part 1: _			
. Schedule Summa	ry		<u>andrometrikaken kiesta tanan taka ana talataa e</u>	en e	e <sup>t volt</sup> ete <u>a a comunicatione</u> e transcent entre e volte.	same amanga danga anga bibligg
Check applicable so	chedules or "None."	► Total i	number of pages	including this	s cover page: 1	
Schedule A-1 - Inves	stments – schedule attached		Schedule C - Incom	me, Loans, & Busi	iness Positions – sche	dule attached
Schedule A-2 - Inves	stments - schedule attached		Schedule D - Incom	me – Gifts – sched	dule attached	
Schedule B - Real P	Property – schedule attached		Schedule E - Incor	me – Giffs – Trave	el Payments – schedul	e attached
	✓ None - /	<b>-or-</b> No reportable interesi	ts on any schedule			
Verification						
MAILING ADDRESS (Business or Agency Address Re	STREET ecommended - Public Document)	CITY		STATE	ZIP CODE	
3231 Main Street	- Louis Dougnony	Oakley		CA	94561	
DAYTIME TELEPHONE NUMBE	R	<del> </del>	E-MAIL ADDRESS			
( 925 ) 625-7004						
	e diligence in preparing this state d schedules is true and complete				knowledge the informa	tion contained
I certify under penalty o	f perjury under the laws of th	e State of California	a that the foregoing	is true and corre	ct.	
	2/23/15					<del>}\</del>
Date Signed4	-///	_ Sig	nature /			

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

Please type or print in ink.

### STATEMENT OF ECONOMIC INTERESTS

#### **COVER PAGE**

Official Use Only

APR 3 0 2015

NAME OF FILER (LAST) (FIRST) Miller Richard 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Oakley Division, Board, Department, District, if applicable Your Position Contract IT ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) 2. Jurisdiction of Office (Check at least one box) ☐ Judge or Court Commissioner (Statewide Jurisdiction) ☐ State ☐ Multi-County City of \_\_\_\_Oakley, California Other \_\_\_\_\_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2014, through Leaving Office: Date Left \_\_\_\_/\_\_\_/\_\_ December 31, 2014. (Check one) -or-The period covered is January 1, 2014, through the date of The period covered is \_\_\_\_\_\_, through leaving office. December 31, 2014. The period covered is \_\_\_\_\_\_ through Assuming Office: Date assumed \_\_\_\_/\_\_\_/\_\_\_ the date of leaving office. and office sought, if different than Part 1: \_\_\_\_ Candidate: Election year .... 4. Schedule Summary ➤ Total number of pages including this cover page: \_ Check applicable schedules or "None." 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 E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - 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) 79 Muth Drive Orinda CA 94563 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (510) 517-8555 rich@ontai.nef 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 corr 4/28/15 Date Signed Signature: (month, day, year) atement with your filing official.)

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Antai Solutions LLC	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
79 Muth Dr.	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
CEO	
GROSS INCOME RECEIVED	ODOGO WOOME DECEMEN
\$500 - \$1,000 \$1,001 - \$10,000	GROSS INCOME RECEIVED  \$500 - \$1,000
\$10,001 - \$100,000  VOVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
Salary Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other(Describe)	Other (Describe)
<ul> <li>2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER</li> </ul>	l t
retail installment or credit card transaction, made in the	
WANT OF LEADER	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%
ADDINESS Audiess Acceptable)	SECURITY FOR LOAN
DUCINECS ACTIVITY IF ANY OF LENDED	None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	
	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD	Sireet address
\$500 - \$1,000	City
<u>\$1,001 - \$10,000</u>	
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
Land Control of the C	Other(Describe)
N/A	
Comments:	

### **SCHEDULE A-2**

## Investments, Income, and Assets of Business Entities/Trusts

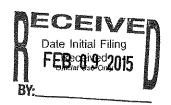
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES	
Name	COMMISSION
Richard Miller	

► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Antai Solutions LLC	
Name 79 Muth Dr. Orinda, CA 94563	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one ☐ Trust, go to 2 ☑ Business Entity, complete the box, then go to 2	Check one  Trust, go to 2  Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS Network Management Services	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED  \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000
NATURE OF INVESTMENT  Partnership Sole Proprietorship   CEO	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below  Salary - 135K	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:	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   / / 14	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000   / 14  / 14  \$100,001 - \$1,000,000   ACQUIRED DISPOSED  Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Ple	ese type or print in ink.				
NAI	ME OF FILER (LAST)		(FIRST)		(MIDDLE)
V	MORROW	LEONARI	D	P	١.
1.	Office, Agency, or Court				_
	Agency Name (Do not use acronyms)				
	City of Oakley				
	Division, Board, Department, District, if applicable		Your Position		
	Public Works Department		Parks and Lar	ndscape Divi	sion Manager
	▶ If filing for multiple positions, list below or on an attach	ment. (Do not use	acronyms)		
	Agency:		Position:		
2.	Jurisdiction of Office (Check at least one box)				
	☐ State		☐ Judge or Court C	Commissioner (S	tatewide Jurisdiction)
	Multi-County		County of		
	✓ City of Oakley		•		
	E OUY OF				
3.	Type of Statement (Check at least one box)				
	Annual: The period covered is January 1, 2014, through December 31, 2014.	ugh	Leaving Office: (Check one)	: Date Left	
	The period covered is// December 31, 2014.	, through	<ul> <li>The period of leaving office</li> </ul>		ry 1, 2014, through the date of
	Assuming Office: Date assumed//			covered is eaving office.	
	Candidate: Election year an	d office sought, if o	different than Part 1:	<del></del>	
4.	Schedule Summary			Maddelerr	A second
	Check applicable schedules or "None."	► Total	number of pages in	cluding this	cover page: 1
	Schedule A-1 - investments - schedule attached	[	Schedule C - Income	, Loans, & Busin	ess Positions - schedule attached
	Schedule A-2 - Investments – schedule attached			- Gifts - sched	ule attached
	Schedule B - Real Property - schedule attached		Schedule E - Income	<ul> <li>Gifts – Travel</li> </ul>	Payments - schedule attached
		-or-			
	□ None - N	o reportable interes	sts on any schedule		
5.	Verification	-			
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY		STATE	ZIP CODE
	3231 Main Street	Oakley	•	CA .	94561
	DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS		
	( 925 ) 625-7039				
	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 Californ	ia that the foregoing is	true and correc	t.
	Date Signed 02/09/2015	ei	gnature A		
	(month, day, year)	. 31		e originally signed state	ment with your filing official.)

## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS 2 7 2015

Date Initial Filing Received Official Use Only

Please type or print in ink.

COVER PAGE

CITY OF OAKLEY

NAME OF FILER	(LAST)	(FIRST) (MIDDLE)
PAETZ	THEODORE	JEROME
1. Office, Agency, or Co		
Agency Name (Do not use a		Dool make turn of T
Division, Board, Department,	AKLEY  District if conlinguals	Public Works INSPECTOR I
Division, Board, Department,	District, it applicable	roa i ostaoli
► If filing for multiple position	ons, list below or on an attachment. (Do	not use acronyms)
Agency:		Position:
2. Jurisdiction of Offic	e (Check at least one box)	
☐ State		☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County		County of
City of OAK	16Y	Other
3. Type of Statement (		
Annual: The period con December 31,	vered is January 1, 2014, through	Leaving Office: Date Left/
-O7-	vered is, thr	
December 31,		leaving office.
Assuming Office: Date	e assumed <u>10 / 11 / 13</u>	O The period covered is/, through the date of leaving office.
Candidate: Election ye	ear and office so	ught, if different than Part 1:
4. Schedule Summary		·
Check applicable sch		Total number of pages including this cover page:
	nents – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
	nents – schedule attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Pro	perty - schedule attached	☐ Schedule E - Income – Gifts – Travel Payments – schedule attached
	-or-  None - No reportable	le interests on any schedule
5. Verification	er en	
MAILING ADDRESS (Business or Agency Address Reco		CITY STATE ZIP CODE
3231 MAIN C	ST. OAKLEY	CA 9456)
· 1-5/ 0-5	7000	E-MAIL ADDRESS
I have used all reasonable d herein and in any attached	tiligence in preparing this statement. I har schedules is true and complete. I ackno	ve reviewed this statement and to the best of my knowledge the information contained wledge this is a public document.
		California that the foregoing is true and correct.
Date Signed MANCE	127/2015	Signature
Date Signed	(month, day, year)	(File the priginally signed statement with your filing official.)

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
THEODORET, PAETZ

1. INCOME RECEIVED	➤ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
City of Oatcley	
ADDRESS (Bueiness Address Acceptable)	ADDRESS (Business Address Acceptable)
(3231 MAIN 6T.	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
OAKIEY CA	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
FABLIC WKS INSPECTOR II	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000	☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership, For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other	Other
(Describe)	(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	RIOD
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a e lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's rs:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
MANAGEMENT TO THE TOTAL PROPERTY OF THE TOTA	%
ADDRESS (Business Address Acceptable)	
	SECURITY FOR LOAN  None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
<u>\$500 - \$1,000</u>	Сйу
\$1,001 - \$10,000	<u> </u>
\$10,001 - \$100,000	Guarantor
OVER \$100,000	□ o#
breast · ·	Other(Describe)
Comments:	

### STATEMENT OF ECONOMIC INTERESTS N.



#### **COVER PAGE**

Please type or print in Ink. (MIDDLE) NAME OF FILER (FIRST) Robani Kevin 1. Office, Agency, or Court Agency Name (Do not use acronyms) Division, Board, Department, District, if applicable Works Director Public WOIK ▶ If filing for multiple positions, fist below or on an attachment. (Do not use acronyms) Position: Agency: . 2. Jurisdiction of Office (Check at least one box) ☐ Judge or Court Commissioner (Statewide Jurisdiction) ☐ State Multi-County County of ... Other . 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2014, through Leaving Office: Date Left \_\_\_\_ December 31, 2014. (Check one) -or-O The period covered is January 1, 2014, through the date of The period covered is leaving office. December 31, 2014. O The period covered is \_\_\_\_\_ Assuming Office: Date assumed ...... the date of leaving office. Candidate: Election year. \_\_\_ and office sought, if different than Part 1; \_ 4. Schedule Summary ► Total number of pages including this cover page: Check applicable schedules or "None." Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached -Of-None - No reportable interests on any schedule Oakley Moin 5. Verification 3231 MAILING ADDRESS MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document) DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS rohani @ ci.oakley. Ca. Us (925) 625 - 7003 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.

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

## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

### STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing
MAR 3 Received

#### **COVER PAGE**

Please type or print in ink.

CITY OF OAKLEY

NAI	NE OF FILER (LAST)	(FIRST) (MIDDLE)			
Sa	nengchalern Billilee	Hofer			
1.	Office, Agency, or Court				
Agency Name (Do not use acronyms)					
	City of Oakley				
	Division, Board, Department, District, if applicable	Your Position	-		
	Public Works and Engineering	Assistant Engineer	_		
	▶ If filing for multiple positions, list below or on an attachment. (Do not u	use acronyms)			
	Agency:	Position:	<del></del>		
2.	Jurisdiction of Office (Check at least one box)				
	State	☐ Judge or Court Commissioner (Statewide Jurisdiction)			
	Multi-County	County of	<b></b>		
	☑ City of Oakley	Other			
	E Sity of		_		
3.	Type of Statement (Check at least one box)				
	Annual: The period covered is January 1, 2014, through December 31, 2014.	Leaving Office: Date Left//(Check one)			
	The period covered is/, through December 31, 2014.	<ul> <li>The period covered is January 1, 2014, through the date of leaving office.</li> </ul>			
	Assuming Office: Date assumed 02 / 23 / 2015	The period covered is			
	Candidate: Election year and office sought,	if different than Part 1:	_		
4. Schedule Summary					
	Check applicable schedules or "None." ► Total	al number of pages including this cover page:			
	Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached	d		
	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 inte	erests on any schedule			
<u> </u>	Verification		envenint <u>o</u>		
J.	MAILING ADDRESS STREET CITY	STATE ZIP CODE	_		
	(Business or Agency Address Recommended - Public Document)	0.0			
	3231 Main Street Oakley  DAYTIME TELEPHONE NUMBER	CA 94561	_		
	( 925 ) 625-7154	saengchalern@ci.oakley.ca.us			
	I have used all reasonable diligence in preparing this statement. I have rev	have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contain erein 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 Califo	·			
	00/04/0045	R-(D) Or Strand Or			
	Date Signed 03/31/2015	Signature (File the originally signed statement with Your filing official.)	_		
	(month, day, year)	h se me outhour affrica entent with ken mad ourour)			

## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

# STATEMENT OF ECONOMIC INTERESTRAR 3 0 2015 Received Official Use Only COVER PAGE

Please type or print in ink.

CITY OF OAKLEY

NAME OF FILER	(LAST)		(FIRST)	(M	IDDLE)
SANDERS		SCOTT		RAYMOND	
1. Office, Agency, o	r Court				
Agency Name (Do not	use acronyms)			. ,	
CITY OF OAKLE	Υ				
Division, Board, Departi	ment, District, if applicable		Your Position		
BUILDING DEPA	RTMENT		CODE ENF	ORCEMENT/BUILDING IN	SPECTOR 2
➤ If filing for multiple p	positions, list below or on an attachme	ent, (Do not u	se acronyms)		· · · · · · · · · · · · · · · · · · ·
Agency:			Position:		
. Jurisdiction of C	Office (Check at least one box)				
State			☐ Judge or Cou	rt Commissioner (Statewide Jurisdi	ction)
Multi-County			County of		
City of OAKLEY					
City of					
. Type of Stateme	nt (Check at least one box)				
	od covered is January 1, 2014, throug	h		ice: Date Left/	
	or 31, 2014.		(Check one)		
The period	od covered is 01 01 201/ er 31, 2014.	4, through	<ul><li>The period</li><li>leaving of</li></ul>	od covered is January 1, 2014, thro ffice.	ugh the date of
Assuming Office:	Date assumed//	<del></del>		od covered is//	, through
Candidate: Election	on year and	office sought, i	different than Part 1: _		
l. Schedule Summ	ary				
Check applicable	schedules or "None."	➤ Tota	I number of pages	including this cover page:	<u> 2</u>
Schedule A-1 - Inv	vestments - schedule attached		Schedule C - Inco	me, Loans, & Business Positions –	schedule attached
	vestments – schedule attached			me - Gifts - schedule attached	
Schedule B - Real	Property - schedule attached			me – Gifts – Travel Payments – sc	hedule attached
		-or-			
ering artir its on gazanthassagar timosa sina yapar tiga ang papa tigang apar	None - No	reportable inter	ests on any schedule		00
. Verification					
MAILING ADDRESS (Business or Agency Address	STREET Recommended - Public Document)	CITY		STATE ZIP CO	DE
3231 MAIN STRE	,	OAKLEY		CA 94561	
DAYTIME TELEPHONE NUM			E-MAIL ADDRESS		
( 925 ) 625-703	1		SANDERS@CI.	OAKLEY.CA.US	
	ble diligence in preparing this stateme hed schedules is true and complete.				formation containe
I certify under penalty	of perjury under the laws of the S	tate of Califor	nia that the foregoing	is true and correct,	
Date Signed <u>03/30/2</u>	015	,	signature Sca	N) and of	3
-	(month day year)		J (C)	a the distinctly officed statement with fill	Catal S

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
SCOTT RAYMOND SANDERS

► 1. INCOME RECEIVED	➤ 1, INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
CITY OF OAKLEY	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
3231 MAIN STREET	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
OAKLEY CA, 94561	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
CODE ENFORCEMENT/BUILDING INSPECTOR 2	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
<b>✓</b> \$10,001 - \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of(Real property, car, boat, etc.)	Sale of
<del></del>	Sale of(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, fist each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other	Other
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	(Describe)
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a e lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's rs:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%
, ==	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD	
<u></u> \$500 - \$1,000	City
\$1,001 - \$10,000	Guarantor
S10,001 - \$100,000	
OVER \$100,000	Other
	(Describe)
Comments:	

## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

# STATEMENT OF ECONOMIC INTERESTS FEB 1 2 Date Initial Filing Received 2015 Official Use Only COVER PAGE

Please type or print in ink.		$\mathbf{C}$	TYORO	AKITV
NAME OF FILER (LAST)		(FIRST)		(MIDDLE)
Simms	Douglas		J.	
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)			**************************************	
City of Oakley				
Division, Board, Department, District, if applicable	)	Your Position		
Building		Chief Building Offic	cial	
► 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		☐ Judge or Court Comm	ssioner (Statewide Jur	isdiction)
Multi-County		County of		
City of Oakley		_		
e cay or	_	Other	,,-	
3. Type of Statement (Check at least one	box)			
Annual: The period covered is January 1, 3 December 31, 2014.	2014, through	Leaving Office: Date (Check one)	Left/	
The period covered is// December 31, 2014.	/, through	<ul> <li>The period covere leaving office.</li> </ul>	d is January 1, 2014,	through the date of
Assuming Office: Date assumed/_		<ul> <li>The period covere the date of leaving</li> </ul>		, through
Candidate: Election year	and office sought, if d	ifferent than Part 1:		
4. Schedule Summary				
Check applicable schedules or "None	e." ► Total	number of pages includ	ing this cover pa	ge: 1
Schedule A-1 - Investments - schedule atta	ched	Schedule C - Income, Loan	s, & Business Position	s - schedule attached
Schedule A-2 - Investments – schedule atta	iched	Schedule D - Income - Gif	s - schedule attached	
Schedule B - Real Property - schedule atta	ched	Schedule E - Income - Gift	s – Travel Payments -	schedule attached
	-01-			
$\square$	None - No reportable interes	ts on any schedule		
5. Verification				
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docume	CITY		TATE ZII	CODE
3231 Main St.	Oakley	C.A	9456	1
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS	. 0.00	
( 925 ) 625-8854		simms@ci.oakley.ca.us	i	
I have used all reasonable diligence in preparing herein and in any attached schedules is true and			st of my knowledge the	e information contained
I certify under penalty of perjury under the la	ws of the State of Californi	a that the foregoing is true a	nd correct.	
Date Signed <u>02/12/2015</u>	Sin	Inature Warry Lu	old in	rus)
(month, day, year)		, ,	ly sighed stalement with your fili	ng official.)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

### STATEMENT OF ECONOMIC INTERESTS

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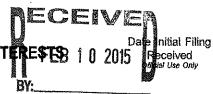
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#### **COVER PAGE**

Please type or print in ink.		CITYOROAKIDV			
NAI	ME OF FILER	Strelo	Kenneth	(Model)	
1.	Office, Agency, or Court		WORKOTH		
	Agency Name (Do not use acronyms)				
	City of O				
	Division, Board, Department, Dist	rict, if applicable	Your Position		
	Plannino	Division	Senia	or Planner	
		ist below or on an attachment. (Do	not use acronyms)		
	Agency:		Position: _		
2.	Jurisdiction of Office (	Check at least one box)			
	State		☐ Judge or	Court Commissioner (Statewide Jurisdiction)	
	Multi-County		County of		
	Acity of Oakle	<del>/</del>	Other		
1400	· · · · · · · · · · · · · · · · · · ·				
	Type of Statement (Chec	·			
	Annual: The period covered December 31, 201		Leaving (Check o	Office: Date Left/	
	-or-			period covered is January 1, 2014, through the date of	
	The period covered December 31, 201	d is, th 4.	nough	ng office.	
	Assuming Office: Date ass	sumed//		period covered is	
	Candidate: Election year _		ought, if different than Part	1:	
4. Schedule Summary			)		
	Check applicable schedules or "None." ► Total number of pages including this cover page:			ges including this cover page:	
	Schedule A-1 - Investments	- schedule attached	Schedule C -	Income, Loans, & Business Positions - schedule attached	
	Schedule A-2 - Investments		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 STRE (Business or Agency Address Recommen		CITY	STATE ZIP CODE	
	3231 Main	St. Oakley,	CA 94561		
	(925) 625-70	236	strelog	D ci. oakley.ca.us	
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information conherein and in any attached schedules is true and complete. I acknowledge this is a public document.				and to the best of my knowledge the information contained	
	I certify under penalty of perju	ary under the laws of the State of	California that the forego	oing is true and correct.	
	2 102/1	· parameter	1	1	
	Date Signed 3/2///	th, day, year)	Signature	(File the originally signed statement with your filing official.)	
	ļ				

## STATEMENT OF ECONOMIC INTERESTS 1 () COVER PAGE BY:\_\_\_\_\_



Please type or print in ink.

	COOD CONTRACTOR OF THE CONTRAC	/ARDDLE\ .				
NAS	NAME OF FILER (LAST) (FIRST) Three makes Jr. Orvibe	Keith				
1.	1. Office, Agency, or Court	***************************************				
	Agency Name (Do not use acronyms) City of Oakley					
	Division, Board, Department, District, if applicable Your Position Community Development	Building Inspector I				
	▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)	7				
	Agency: Position:					
2.	2. Jurisdiction of Office (Check at least one box)					
	☐ State ☐ Judge or Cou	rt Commissioner (Statewide Jurisdiction)				
	Multi-County County of					
	Statis City of Oakley Other					
3.	3. Type of Statement (Check at least one box)					
	December 31, 2014. (Check one)	ice: Date Left/				
	December 31, 2014. leaving o	od covered is January 1, 2014, through the date of ffice.				
		od covered is, through of leaving office,				
	Candidate: Election year and office sought, if different than Part 1: _					
4.	4. Schedule Summary	including this cover negati				
	Check applicable schedules or "None." ► Total number of pages including this cover page:					
		me, Loans, & Business Positions – schedule attached me – Gifts – schedule attached				
		me – Gifts – Travel Payments – schedule attached				
	-or-	•				
☐ None - No reportable interests on any schedule						
5.	5. Verification					
	MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE				
	3231 Main St. Valley DAYTIME TELEPHONE NUMBER  DAYTIME TELEPHONE NUMBER  DAYTIME TELEPHONE NUMBER	CA 99341				
	(925) 584-7514 Hwemm	her@ci.Oakhey.ca.us				
	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and 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 gorrect.				
	Date Signed 2/10/15 Signature ().	feit Jumeles f.				
	(month, day, year) (Fi	le the originally signed statement with your filing official.)				

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
D. Keith Thremmler

1. INCOME RECEIVED Control of the second sec	► 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
City of Cakhey			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
3231 Main St Oakley, C4 94561  BUSINESS ACTIVITY, IF ANY, OF SOURCE  COMMUNITY Development  YOUR BUSINESS POSITION	(		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
Community Development			
YOUR BUSINESS POSITION /	YOUR BUSINESS POSITION		
Building Inspector I			
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED		
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000  \$1,001 - \$10,000		
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000		
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED		
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)		
Sale of	Sale of		
(Real property, car, boat, etc.)	(Real property, car, bost, etc.)		
Loan repayment	Loan repayment		
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, #st each source of \$10,000 or more		
The state of the s			
(Describe)	(Describe)		
Other	Other		
Other(Describe)	Other (Describe)		
Other(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE	Other(Describe)		
Other	Other		
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official s	Other		
Other	Other(Describe)		
Other	Other (Describe)  lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to that the status. Personal loans and loans received not in a lender's the status.  INTEREST RATE TERM (Months/Years)		
Other	Other (Describe)  IRIOD  Ilending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to that the state of the lender's received not in a lender's that the state of the lender's lender lender's lender lender's lender lender's lender lender's lender lender's lender le		
Other	Other (Describe)  lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to that the description of the lender's received not in a lender's lende		
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official s regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	Other		
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official s regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)	Other (Describe)  IRIOD  Ilending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to that the state of the lender's received not in a lender's that the state of the lender's lender lender's lender lender's lender lender's lender lender's lender lender's lender le		
Other	Other		
Other	Other		
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official segular course of business must be disclosed as follown NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	Other		
Other	Other		
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official segular course of business must be disclosed as follown NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	Other		



### STATEMENT OF ECONOMIC INTERPRETS 2015

Date Initial Filing
Received

COVER PAGE CITY OF OAKLE

Please type or print in ink. NAME OF FILER (LAST) (FIRST) Eva "Libby" Elizabeth Beede-Vreonis 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Oakley Division, Board, Department, District, if applicable Your Position City Clerk / Paralegal ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Successor Agency; Oakley Oversight Board Secretary 2. Jurisdiction of Office (Check at least one box) ☐ Judge or Court Commissioner (Statewide Jurisdiction) ☐ State ■ Multi-County . ☐ County of \_ City of Oakley Other \_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2014, through Leaving Office: Date Left \_\_\_\_\_/\_\_\_ December 31, 2014. (Check one) O The period covered is January 1, 2014, through the date of The period covered is \_\_\_\_\_\_\_ through leaving office. December 31, 2014. O The period covered is \_\_\_\_\_/\_\_\_ Assuming Office: Date assumed \_\_\_\_\_/\_\_ the date of leaving office. \_\_\_\_\_ and office sought, if different than Part 1: \_ Candidate: Election year \_\_ 4. Schedule Summary ► Total number of pages including this cover page: 2 Check applicable schedules or "None." Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - 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) 3231 Main Street Oakley CA 94561 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (925)625-7013 vreonis@ci.oakley.ca.us 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 03/27/2015 Signature (month, day, year) (File the originally signed statement with your filing official.)

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Eva E "Libby" Reede-Vreenis

1. INCOME RECEIVED	▶ 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
U.S.S. POSCO			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
900 Loveridge Road, Pittsburg, CA 94565			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
Steel Industry			
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
Operator			
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED		
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000		
▼ \$10,001 - \$100,000 □ OVER \$100,000	S10,001 - \$100,000 OVER \$100,000		
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED		
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)		
Sale of	Sale of		
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)		
Loan repayment	Loan repayment		
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more		
(Describe)	(Describe)		
Other	Other		
(Describe)  ▶ 2, LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PEF	(Describe)		
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a e lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's rs:		
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)		
	% None		
ADDRESS (Business Address Acceptable)			
	SECURITY FOR LOAN		
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence		
	Real Property		
HIGHEST BALANCE DURING REPORTING PERIOD	Street address		
\$500 - \$1,000			
\$1,001 - \$10,000	City		
	Guarantor		
\$10,001 - \$100,000			
1 1 0) (77 0 4400 000			
OVER \$100,000	Other		
OVER \$100,000	Other(Describe)		
Comments:			