

Date Signed

(month, day, year)

STATEMENT OF ECONOMIC INTERESTS

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Official Use Only

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

STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Please type or print in ink. NAME OF FILER (LAST) (MIDDLE) 1. Office, Agency, or Court Agency Name (Do not use acronyms) Your Position Division, Board, Department, District, if applicable ▶ 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) ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction) Multi-County _ County of _ XCity of OAVLEY 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2016, through Leaving Office: Date Left ____/____ December 31, 2016. The period covered is AWA 3 O The period covered is January 1, 2016, through the date of December 31, 2016. leaving office. O 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 (must complete) ▶ Total number of pages including this cover page: ___ Schedules attached Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-None - No reportable interests on any schedule 5. Verification MAILING ADDRESS CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) DAYTIME TELÉPHONE NUMBER 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.)

STATEMENT OF ECONOMIC INTERESTS COVER PAGE



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NA	ME OF FILER (LAST)	(FIRST)		(MIDDLE)		
	Garcia	Nicho	las	Raymond		
1.	Office, Agency, or Court					
	Agency Name (Do not use acronyms					
	City of Oak	les	Commitee Your Position	member		
	Division, Board, Department, District, i	f applicable	Your Position			
	Citizen Plan	ning Committee		76) 		
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4.	Schedule Summary (must	complete) ► Total numl	ber of pages including this cov	er page:		
	Schedules attached		, ,			
	Schedule A-1 - Investments -	- schedule attached	Schedule C - Income, Loans, & B	usiness Positions – schedule attached		
	Schedule A-2 - Investments -	schedule attached	☐ Schedule D - Income - Gifts - sc	hedule attached		
	Schedule B - Real Property -	schedule attached	Schedule E - Income - Gifts - Tra	avel Payments - schedule attached		
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Э.	Verification MAILING ADDRESS STREET	CITY	STATE	ZIP CODE		
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	DASI MAIN ST	OA	TE-MAIL ADDRESS	94561		
	(905) 625 - 700	∂ *	1 1	000.000		
	12 2000 7 - 6.	preparing this statement. I have re		f my knowledge the information contained		
			ifornia that the foregoing is true and	correct.		
	0 - 21	. 7	01-	/2		
	Date Signed 3 7 5 1 - (month, day	I /	Signature (File the originally sign	ned statement with your filling official:		

STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Please type or print in ink. NAME OF FILER (LAST) (FIRST) (MIDDLE) S Gomez Veronica 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Oakley Division, Board, Department, District, if applicable Your Position Citizen Planning Advisor Group Citizen Planning Advisor ▶ 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 __ X City of Oakley Other _ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2016, through Leaving Office: Date Left _____/____ December 31, 2016. (Check one) -Or-O The period covered is January 1, 2016, through the date of The period covered is ___ leaving office. December 31, 2016. 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 (must complete) ▶ Total number of pages including this cover page: _ Schedules attached Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -Or-None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) 4608 La Vista Drive Oakley CA 94561 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (925) 699-3701 fishdancin@yahoo.com 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 correspondent 03/23/2017 Date Signed _ Signatur (File the anginally signed statement with your filing (month, day, year)

FRPE Form 700 (2016/2017)

STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Please type or print in ink.

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	Division, Board, Department, District, if applicable		Your Position	
	▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)			
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	Multi-County		County of	
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Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached				
	None - No reportable interests on any schedule			
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	MAILING ADDRESS STREET	CITY	T STATE	ZIP CODE
	(Business or Agency Address Recommended - Public Document)			
	DAYTIME TELEPHONE NUMBER	1 Posteri	IAIL ADDRESS	
	(925) 752-2722		nmlawrence 142	
	I have used all reasonable diligence in preparing this statement. I herein and in any attached schedules is true and complete. I ack			knowledge the information contained
	I certify under penalty of perjury under the laws of the State			ect.
	Date Signed MAR 29 2017 (month, day, year)	Signa	ture Juliel's F	tement with your fijing official.)
	(month, day, year)		e (i de tile originally signed stat	tomorn with your namy omoral.)



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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1. Office, Agency	, or Court			
Agency Name (Do	not use acronyms)	***************************************		
Oakley Plannir	ng Commission			
Division, Board, Dep	partment, District, if applicable		Your Position	
N/A			Citizen Planning Advisor	
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)				
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. Verification		Silver and the second		
MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
3231 Main Stre	ress Recommended - Public Document)	Oakley	CA	94561
DAYTIME TELEPHONE N			E-MAIL ADDRESS	34301
(925) 625-70	000		Patwiga QOH.	net
I have used all reason herein and in any at	onable diligence in preparing this stateme ttached schedules is true and complete.	nt. I have review I acknowledge th	ed this statement and to the best of my his is a public document.	knowledge the information contained
	alty of perjury under the laws of the S	AT. (4)	* 0 0	ct.
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