1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Division, Board, Department, District, if applicable

Your Position

► 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

☐ Multi-County ______________________________________

☐ County of _________________________________________

☐ City of ___________________________________________

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Other ______________________________

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

☐ Annual: The period covered is January 1, 2016, through December 31, 2016.

-OR-

The period covered is __________/_________/__________, through December 31, 2016.

☐ Assuming Office: Date assumed __________/_________/__________

☐ Leaving Office: Date Left __________/_________/__________

☐ The period covered is January 1, 2016, through the date of leaving office.

-OR-

☐ The period covered is __________/_________/__________, through 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 A-2 - Investments – schedule attached

☐ Schedule B - Real Property – schedule attached

-OR-

☐ None - No reportable interests on any schedule

☐ Schedule C - Income, Loans, & Business Positions – schedule attached

☐ Schedule D - Income – Gifts – schedule attached

☐ Schedule E - Income – Gifts – Travel Payments – schedule attached

5. Verification

MAILING ADDRESS ____________________________ STREET ____________________________

(City or Agency Address Recommended - Public Document)

CITY ____________ STATE ____________ ZIP CODE ____________

DAYTIME TELEPHONE NUMBER _______ E-MAIL ADDRESS ____________________________

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

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

Date Signed ________________ (month, day, year) Signature ____________________________

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

FPPC Form 700 (2016/2017)
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