

Please type or print in ink.			
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Cole	Derek		P
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
City of Oakley			
Division, Board, Department, District, if applica	able	Your Position	
	· · · · · · · · · · · · · · · · · · ·	City Attorney	· · · · · · · · · · · · · · · · · · ·
► If filing for multiple positions, list below or o	on an attachment. (Do not use	acronyms)	
Agency: Successor Agency to the O	akley Redevelopment	Position: General Counse	<u> </u>
Agency			
2. Jurisdiction of Office (Check at leas	st one box)		
☐ State		☐ Judge or Court Commissioner	(Statewide Jurisdiction)
☐ Multi-County		County of	
✓ City of Oakley		Other Successor Agency	y to the Oakley
		Redevelopment A	gency
3. Type of Statement (Check at least of	ne box)		
Annual: The period covered is January	1, 2015, through	Leaving Office: Date Left (Check one)	
December 31, 2015.		, ,	uary 1, 2015, through the date of
The period covered is/_ December 31, 2015.	, through	leaving office.	daly 1, 2010, allough the date of
Assuming Office: Date assumed	1 1	-or- O The period covered is	, through
Assuming Office: Date assumed	-1	the date of leaving office.	· •
Candidate: Election year	and office sought, if o	lifferent than Part 1:	
V. Caledale Common designation	laa -		2
4. Schedule Summary (must comp	nete) 🕨 lotal number	of pages including this cover	page.
Schedules attached			
Schedule A-1 - Investments - schedu		Schedule C - Income, Loans, & Busin	
Schedule A-2 - Investments - schedu	THE RESIDENCE OF THE PARTY OF T	Schedule D - Income - Gifts - sched	
Schedule B - Real Property - schedu	ile attached	Schedule E - Income - Gifts - Travel	Fayments - scriedule attached
-or- None - No reportable interests o			
	n any schedule		
	n any schedule		
5. Verification		STATE	ZIP CODE
5. Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Dox	CITY Current)		:
5. Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Dox 2261 Lava Ridge Court	CITY	CA	ZIP CODE 95661
5. Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Dox 2261 Lava Ridge Court DAYTIME TELEPHONE NUMBER	CITY Current)		:
5. Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Dox 2261 Lava Ridge Court DAYTIME TELEPHONE NUMBER (916) 780-9009 I have used all reasonable diligence in prepar	CITY Roseville ing this statement. I have review	CA E-MAIL ADDRESS dcole@cotalawfirm.com ved this statement and to the best of my	95661
5. Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Dox 2261 Lava Ridge Court DAYTIME TELEPHONE NUMBER (916) 780-9009	CITY Roseville ing this statement. I have review and complete. I acknowledge to	CA E-MAIL ADDRESS dcole@cotalawfirm.com wed this statement and to the hest of my his is a public document.	95661 y knowledge the information contained
MAILING ADDRESS (Business or Agency Address Recommended - Public Doc 2261 Lava Ridge Court DAYTIME TELEPHONE NUMBER (916) 780-9009 I have used all reasonable diligence in preparherein and in any attached schedules is true I certify under penalty of perjury under the	CITY Roseville ing this statement. I have review and complete. I acknowledge to laws of the State of Californ	E-MAIL ADDRESS dcole@cotalawfirm.com ved this statement and to the hest of my his is a public document. ia that the foregoing is true and cor	95661 y knowledge the information contained
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Dox 2261 Lava Ridge Court DAYTIME TELEPHONE NUMBER (916) 780-9009 I have used all reasonable diligence in prepar herein and in any attached schedules is true	CITY Roseville ing this statement. I have review and complete. I acknowledge to laws of the State of Californ	E-MAIL ADDRESS dcole@cotalawfirm.com ved this statement and to the hest of my his is a public document. ia that the foregoing is true and cor- gnature	95661 y knowledge the information contained

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
Derek P. Cole

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Cota Cole LLP	
Name ·	Name
2261 Lava Ridge Court, Roseville, CA 95661	
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
☐ Trust, go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Law Firm	
	THE ALPHANTIA IS ASSISTED TO A STATE OF THE
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$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	☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000
☑ Over \$1,000,000	
NATURE OF INVESTMENT	NATURE OF INVESTMENT
☑ Partnership ☐ Sole Proprietorship ☐ — Other	Partnership Sole Proprietorship Other
VOLUE BUSINESS BOSITION Partner	
YOUR BUSINESS POSITION Partitle!	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 <u>TO</u> THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
☐ \$500 - \$1,000	\$500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000	\$1,001 - \$10,000
▶ 3. 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.)	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below
None or ✓ Names listed below	Notice of Statistics instances in the statistics in the statistic in the
City of Oakley	
	i
▶ 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 Check one box:	LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
T MACO MEN THE THE	
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	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:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$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
l easehold Other	Leasehold Other
Leasehold Other	Yrs. remaining
Check box if additional schedules reporting investments or real property	Check box if additional schedules reporting investments or real property are attached
are attached	I are analysis

Comments:_

RECEIVE

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Ditial Filing Received

COVER PAGE

CITY OF OAKLE

Please type or print in ink.			
NAME OF FILER (LAST) HORDUSTLO	DOMO LAO	7	(MIDDLE)
1. Office, Agency, or Court	D-1091013		
Agency Name (Do not use acronyms)	Tity Come! O	The state of the s	
Division, Board, Department, District, if applicable	aty Conel	ition	
► If filing for multiple positions, list below or on an	attachment. (Do not use acronyms)		
Agency:	Position:		
2. Jurisdiction of Office (Check at least on	e box)		
☐ State	-	or Court Commissioner (State	•
Multi-County		of	
Dety of Orthley	Other _		
3. Type of Statement (Check at least one be	ox)		***************************************
Annual: The period covered is January 1, 20 December 31, 2015.	15, through Leavir	ng Office: Date Left/_ (cone)	
-or- The period covered is/ December 31, 2015.	J, tinough	e period covered is January 1 ving office.	, 2015, through the date of
Assuming Office: Date assumed	O Th	e period covered is	, through
Candidate: Election year	and office sought, if different than Pa	rt 1:	
4. Schedule Summary (must complete	E) > Total number of pages inc	luding this cover page	
Schedules attached		O DUNING	
Schedule A-1 - Investments - schedule at Schedule A-2 - Investments - schedule at		Income, Loans, & Business F Income – Giffs – schedule at	
Schedule B - Real Property - schedule at		lricome – Gifts – Travel Payn	perits – schedule attached
-or-	and produced in the second		
None - No reportable inferests on ar Verification 5. Verification	v soneume		
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE ·
(Business or Agency Address Recommended - Public Document	- Oallon	C	94561
DAYTIME TELEPHONE NUMBER (5.25) 754-4005	E-MAIL ADVERESS		
I have used all reasonable diligence in preparing th	is statement. I have reviewed this stateme	ent and to the best of my know	vledge the information contained
herein and in any attached schedules is true and	· ·	•	
I certify under penalty of perjury under the law	s of the state of Camorina that the lote	To the authorite to the contract.	
Date Signed	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%)

ľ	CALIFO	JRNIA FORM	/ UU
ı	FAIR POLI	TICAL PRACTICES C	OMMISSION
-	Name	1.0	·
1.	HOW	HARROU	016
ᆫ	<u> </u>		

Do not attach brokerage or financial statements.

	NAME OF PURPOSE FUTTY
NAME OF BUSINESS ENTITY (Control	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Netwil Sules a Storace	
relay July a Dior AC	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000	\$2,000 - \$10,000
\$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 O Income Received of \$500 or More (Report on Schedule C)	Partnership C Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
O littoriae Maceived of \$200 of More (Mehou on Schediffe C)	O modific faccified of good of more prepare of schedule of
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>, , 15</u> <u>, , 15</u>	
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
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \qquad \qqqqq \qqqqqqqqqqqqqqqqqqqqqqqqqqqqq
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 \qquad Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership O 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:
<u> </u>	/
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
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership (Income Received of \$0 - \$499	(Describe) 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:
/	/ / 15 / / 15 ACQUIRED DISPOSED
עריאחועבה הופג <i>ה</i> פבה	I AGGRED SIGNOLE
Comments:	

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
EVARENCE PROSTE PAC	
Name 1189 Warn ST Obbles a	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 \$10,001 - \$1,000,000 \$500,001 - \$1,000,000 \$500,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	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 TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$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	➤ 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:
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property 1.89 WAL ST OFFILE OFFILE	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or 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	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 150,001 - \$100,000 150,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 Compared Comp
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:

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CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

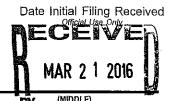
Date Initial Filing Received

COVER PAGE

CITY OF OAKLEY

Please type or print in ink.		a po como a de la como	
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
17199185	· · Ohe		-11er
1. Office, Agency, or Court			
Agency Name (Do not use acronyms) AROL OAKLE	y Via	emayor ion	
Division, Board, Department, District, if applicable	Your Posit	ion	
	·		AR WE DUTTE TO THE
▶ If filing for multiple positions, list below or on a	•	4	
Agency: Oakley oversig	ht board Position:	boardnon be	
2. Jurisdiction of Office (Check at least of	ne box)		
☐ State	Judge or	r Court Commissioner (Statewide Ju	risdiction)
Multi-County	County of	of	
City of Oc-Kley	Other		
3. Type of Statement (Check at least one b	oox)		and the second s
Annual: The period covered is January 1, 20 December 31, 2015.	015, through Leaving (Check	g Office: Date Left/	
The period covered is		period covered is January 1, 2015, ing office.	through the date of
Assuming Office: Date assumed	O The	period covered is	, through
Candidate: Election year		- "	· · · · · · · ·
4. Schedule Summary (must complet Schedules attached	e) ► Total number of pages incl	uding this cover page:	
Schedule A-1 - Investments — schedule a	uttached Schedule C - II	ncome, Loans, & Business Positions	- schedule: attached
Schedule A-2 - Investments - schedule a		ncome - Gifts - schedule attached	
Schedule B - Real Property - schedule a	ittached Schedule E - it	ncome Gifts Travel Payments	schedule attached
-or- √√\ None - No reportable interests on a	mu schodulo		
5. Verification	n) done date		2500年(2000年) 1900年(2010年) 1900年(2010年) 1900年(2010年) 1900年(2010年)
MAILING ADDRESS STREET	CITY	STATE Z	IP CODE
(Business or Agency Address Recommended - Public Documen 3231 Man Street	" Oukley	CA C	14561
DAYTIME TELEPHONE NUMBER (925) 67-5-7030	E-MAIL ADDRESS	S@CI. oakley	.Ca.us
I have used all reasonable diligence in preparing the herein and in any attached schedules is true and	this statement. I have reviewed this statemen		ne information contained
I certify under penalty of perjury under the law			
1/26/16	0:	Hoering	
Date Signed	Signature	(Sile the critically sensed statement with your t	iling official 1

STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)		BY: (MIDDLE)	
MONTGOMERY	BRYAN		HYRUM	
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	•	
► If filing for multiple positions, list below or on an	attachment. (Do not use	acronyms)		
Agency: Municipal Pooling Authority		Position: Board Member	er	
2. Jurisdiction of Office (Check at least on	box)			
State		☐ Judge or Court Commission	ner (Statewide Jurisdiction)	
Multi-County Contra Costa, San Mateo	San Joaquin, n	County of		
City of Oakley				
City of		Other		
3. Type of Statement (Check at least one bo	x)			
Annual: The period covered is January 1, 20	•	Leaving Office: Date Le	ft	
December 31, 2015.	, ,	(Check one)		
-or- The period covered is/	/, through	•	January 1, 2015, through the	date of
December 31, 2015.		leaving office. -or-		
Assuming Office: Date assumed		 The period covered is the date of leaving of 	, t	hrough
Candidate: Election year	and office sought, if d	ifferent than Part 1:		
4. Schedule Summary (must complete		of pages including this co	ver nage	
Schedules attached				
Schedule A-1 - Investments - schedule att		Schedule C + Income, Loans, & I		attached 📒
Schedule A-2 - Investments - schedule att		Schedule D = Income - Gifts-so		
Schedule B - Real Property - schedule att	ached	Schedule E - Income — Gifts — Ti	avel Payments—schedule atta	iched
-or-				
None - No reportable interests on an	y schedule			
5. Verification				
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	. STATI	E ZIP CODE	
3231 Main Street	Oakley	CA	94561	
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS		
(925) 625-7025		montgomery@ci.oakley.c	a.us	
I have used all reasonable diligence in preparing thin herein and in any attached schedules is true and continuous			of my knowledge the information	n contained
I certify under penalty of perjury under the laws	of the State of Californi	a that the foregoing is true and	correct.	7
Date Signed 03/18/2016	ei.	mature Dugard	Montonew.	
(month, day, year)			ned statement with your filing official.	

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

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
MONTGOMERY, Bryan

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Eagle Materials	Franklin Covey
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Building Materials	Personal Planning
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	☐ \$2,000 - \$10,000
\$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 ✓ Stock Other
(Describe) Partnership Oncome Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) 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:
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Halliburton	Skywest
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Energy	Aviation
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	2 ,000 - \$10,000
\$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:
/ / 1 5 / / <u>15</u>	/ / 15 <u>/</u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Archer Daniels Midland GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Agriculture, etc	END MADICET VALUE
FAIR MARKET VALUE	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
	\$2,000 - \$10,000
S \$100,001 - \$1,000,000 Over \$1,000,000	[
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other
Stock Other (Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 15 <u>, , 15</u>	/ / 15 / / 15
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	11

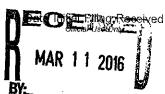
Comments:

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
MONTGOMERY, Bryan

1. INCOME RECEIVED NAME OF SOURCE OF INCOME	► 1. INCOME RECEIVED NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
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, boat, etc.) Loan repayment Commission or Rental Income, list each source of \$10,000 or more (Describe) Other (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 vs:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
City of Oakley	3 % None 30
ADDRESS (Business Address Acceptable) 3231 Main St. Oakley, CA BUSINESS ACTIVITY, IF ANY, OF LENDER Municipality HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN None Personal residence Real Property 10 Brooks Ct. Street address
↑ \$500 - \$1,000	Oakley, CA
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
✓ OVER \$100,000	Other(Describe)
Comments:	EDDS F



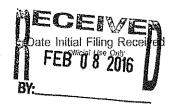
Please type or print in ink.			BY:
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Perry	Vanessa	a F	Renee
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)	, , , , , , , , , , , , , , , , , , , ,	· , , , , , , , , , , , , , , , , , , ,
City of Oakley			,
Division, Board, Department, District,	f applicable	Your Position	
Oakley City Council		Councilmember	
► If filing for multiple positions, list b	elow or on an attachment. (Do not u	se acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Chec	k at least one box)	· · · · · · · · · · · · · · · · · · ·	
☐ State		☐ Judge or Court Commissioner (S	tatewide Jurisdiction)
Multi-County		County of	
City of Oakley		Other	·
			ME SOME THIS IS NO SOME THE SO
3. Type of Statement (Check at	least one box)		
Annual: The period covered is December 31, 2015.	lanuary 1, 2015, through	Leaving Office: Date Left (Check one)	
The period covered is December 31, 2015.	, through	 The period covered is Janua leaving office. -or- 	ry 1, 2015, through the date of
Assuming Office: Date assume	d	The period covered is the date of leaving office.	_/, through
Candidate: Election year	and office sought, i	f different than Part 1:	
4. Schedule Summary (must Schedules attached	complete) ► Total numbe	r of pages including this cover p	age:
Schedule A-1 - Investments -	schedule attached	Schedule C - Income, Loans, & Busines	ss Positions – schedule attached
Schedule A-2 - Investments -		Schedule D - Income - Gifts - schedule	
Schedule B - Real Property -	schedule attached	Schedule E - Income – Gifts – Travel P	ayments - schedule attached
-or-			
☑ None - No reportable inter	ests on any schedule		
. Verification	May form the N.P. Market and State and State Asset (State Asset (State and Asset (State and Asset (State Asse		n Ayu, giribid (nagaru, giribinimin, an sahari massar unun kanari bibi bana bahang yakh dang a bahas nagu, angga biya da da
MAILING ADDRESS STREET (Business or Agency Address Recommended -	CITY	STATE	ZIP CODE
3231 Main Street	Oakley	CA	94561
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS	
(925) 625-7000		perry@ci.oakley.ca.us	
I have used all reasonable diligence in herein and in any attached schedules		ewed this statement and to the best of my kee this is a public document.	nowledge the information contained
I certify under penalty of perjury u	nder the laws of the State of Califor	rnia that the foregoing is true and correc	t.
Date Signed 03/10/2016		Signature \(\sqrt{\sq}}}}}}}\signtarinftine{\sintitta}\sintintifta}\sintinity}}\signta\sintitex\sintitta}\sintinity}\signta\sintitta\sintitt{\sintity}}}\signta\sintitta\sintitta\sintitta\sintitta}\sintitta\sintitta\sintititit{\sintitit{\sintii}}\sintititit{\sintitta\sintitta\sintitta\sintitititit{\sintiin}\sintititititititititititi\sintitititititititititititititititititit	
(month, day,		(File the originally signed states	ment with your filing official.)

Candidate Intention Statement	Date Stamp CALIFORNIA	M 501
Check One: 🛛 Initial Amendment (Explain)	For C	For Official Use Only
		····••••••••••••••••••••••••••••••••••
1. Candidate Information:		
NAME OF CANDIDATE (Last, First, Middle Initial) PAX (FAX NUMBER (optional) E-MAIL (optional)	
Perry, Vanessa R (510) 427-6623 ()	
STREET ADDRESS CITY	STATE ZIP CODE .	
1875 Lakewood Drive Oakley	_] ->	
OFFICE SOUGHT (FOSTION TITLE) AGENCY NAME OFFICE SOUGHT (FOSTION TITLE)	DISTRICT NUMBER, IT applicable. X NON-PARTISAN	SAN
OFFICE JURISDICTION		
☐ City ☐ County ☐ Multi-County: City of Oakley (Name of Multi-County Jurisdiction)	2016 (Year of Election)	
ndidates, and		
☐ I accept the voluntary expenditure ceiling for the election stated above.		
☐ I do not accept the voluntary expenditure ceiling for the election stated above. Amendment:		
O I did not exceed the expenditure ceiling in the primary or special election held on://. the general or special run-off election.	and I accept the voluntary expenditure ceiling for	ure ceiling for
(Mark If applicable)		
On/, I contributed personal funds in excess of the expenditure ceiling for the election stated above.	n stated above.	
3. Verification:		
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	le and correct.	
Executed on03/09/2016 Signature \ (\((\text{Canydidate}) \) (\((\text{Canydidate}) \)	FPPC Advice: advice@	FPPC Form 501 (Jan, @fppc.ca.gov (866/275
	FPPC Advice: advice(FPPC Advice: advice@tppc.ca.gov (866/2/5

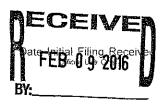
ì

FPPC Form 501 (Jan/2016) ice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov





Please type or print in ink.			
NAME OF FILER (LAST)	(FIRST)	{N	(IDDLE)
Pope	Randy	D	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
City Of Oakley			
Division, Board, Department, District, if applicab	le	Your Position	
		City Councilmember	
► If filing for multiple positions, list below or or	an attachment. (Do not us	e acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Check at least	one box)		· · · · · · · · · · · · · · · · · · ·
State		☐ Judge or Court Commissioner (Statewide Jurisd	iction)
Multi-County		County of	
☑ City of Oakley		Other	
City of			
3. Type of Statement (Check at least one	box)		
Annual: The period covered is January 1, December 31, 2015.	2015, through	Leaving Office: Date Left	
-or- The period covered is/ December 31, 2015.	, through	 The period covered is January 1, 2015, three leaving office. -or- 	ough the date of
Assuming Office: Date assumed		The period covered is/ the date of leaving office.	, through
Candidate: Election year	and office sought, if	different than Part 1:	
4. Schedule Summary (must comple Schedules attached	ete) ► Total number	of pages including this cover page: 1	1 2 - 2 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2
Schedule A-1 - Investments – schedule	attached	Schedule C - Income, Loans, & Business Positions - s	chedule attached
Schedule A-2 - Investments – schedule		Schedule D - Income - Gifts - schedule attached	
Schedule B - Real Property - schedule	attached [Schedule E - Income - Gifts - Travel Payments - sch	edule attached
-or-			
✓ None - No reportable interests on	any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docur	CITY nent)	STATE ZIP C	ODE
2063 Main ST #265	Oakley	CA 94561	
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS	
(925) 625-3357		randypope@comcast.net	
I have used all reasonable diligence in preparin herein and in any attached schedules is true a	g this statement. I have reviend complete. I acknowledge	ewed this statement and to the best of my knowledge the in this is a public document.	nformation contained
I certify under penalty of perjury under the	aws of the State of Califor	nia that the foregoing is true and correct.	
05/46/2046		ΔV_{Δ}	
Date Signed 05/16/2016 (month, day, year)	· · · · · · · · · · · · · · · · · · ·	ignature (File the diginally signed statement with your filing of	official.)
(monus, vay, year)		to and disability and a store and a store and a	:7



Please type or print in ink.		
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Romick	Kevin	R
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
Oakley City Council		
Division, Board, Department, District, if applicab	le	Your Position
		Council Memebr
▶ If filing for multiple positions, list below or or	an attachment. (Do not use	e acronyms)
Адепсу:		Position:
	W	
2. Jurisdiction of Office (Check at least	one box)	
State		Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County		☑ County of Contra Costa
☑ City of Oakley		☐ Other
W City of		
3. Type of Statement (Check at least one	e box)	
Annual: The period covered is January 1, December 31, 2015.	2015, through	Leaving Office: Date Left/(Check one)
The period covered is/_ December 31, 2015.	, through	 The period covered is January 1, 2015, through the date of leaving office.
Assuming Office: Date assumed	<u> </u>	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 comple	ofo) > Total number	of pages including this cover page:
Schedules attached	ete) > iotai iidinbei	or pages including this cover page.
Schedule A-1 - Investments - schedule	attached 🖳	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments - schedule	e 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 □ □ None - No reportable interests on □ No reportable interests on	any schedule	
5. Verification		
MAILING ADDRESS STREET	CITY	STATE ZIP CODE
(Business or Agency Address Recommended - Public Docur. 3231 Main Street	nent) Oakley	Ca 94561
DAYTIME TELEPHONE NUMBER	Carley	E-MAIL ADDRESS
(925) 625-7000		kevin@romick.net
		wed this statement and to the best of my knowledge the information contained
I certify under penalty of perjury under the	,	
Date Signed 2 - 9 - 301	6 s	ignature Serry Amuck
(month, day, year)	_	(File the originally signed statement with your filing official.)

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 70	
Name	
Kevin Romick	_

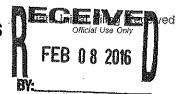
ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
2066 Verona Ct	_
CITY	СІТУ
Oakley	_
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold []	
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	sources of rental income: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
	None
None	1 L None
None	1_1 Notice
None	- I None
None	
None	- I None
None .	
•	
You are not required to report loans from commerc business on terms available to members of the pub	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and
You are not required to report loans from commerc	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and
You are not required to report loans from commerc business on terms available to members of the pub	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business of Lender*	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows:
You are not required to report loans from commerc business on terms available to members of the publicans received not in a lender's regular course of b NAME OF LENDER* Sierra Pacific Mortgage	ial lending institutions made in the lender's regular course of olic without regard to your official status. Personal loans and usiness must be disclosed as follows:
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business of Lender* Sierra Pacific Mortgage ADDRESS (Business Address Acceptable)	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows:
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business of Lender* Sierra Pacific Mortgage ADDRESS (Business Address Acceptable) PO Box 7168, Pasadena, Ca 91109 7168	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business of Lender* Sierra Pacific Mortgage ADDRESS (Business Address Acceptable)	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER*
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business of Lender* Sierra Pacific Mortgage ADDRESS (Business Address Acceptable) PO Box 7168, Pasadena, Ca 91109 7168	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business of Lender* Sierra Pacific Mortgage ADDRESS (Business Address Acceptable) PO Box 7168, Pasadena, Ca 91109 7168 BUSINESS ACTIVITY, IF ANY, OF LENDER	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
You are not required to report loans from commerce business on terms available to members of the put loans received not in a lender's regular course of business received not in a lender's regular course of business Activity (Business Acceptable) PO Box 7168, Pasadena, Ca 91109 7168 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) None
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business (Business Acceptable) PO Box 7168, Pasadena, Ca 91109 7168 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE Whome HIGHEST BALANCE DURING REPORTING PERIOD	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) "" None HIGHEST BALANCE DURING REPORTING PERIOD
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business (Business Address Acceptable) PO Box 7168, Pasadena, Ca 91109 7168 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) Whose HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business (Business Acceptable) PO Box 7168, Pasadena, Ca 91109 7168 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE Whome HIGHEST BALANCE DURING REPORTING PERIOD	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) "" None HIGHEST BALANCE DURING REPORTING PERIOD
You are not required to report loans from commerce business on terms available to members of the publicans received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business (Business Address Acceptable) PO Box 7168, Pasadena, Ca 91109 7168 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) Whose HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000	ial lending institutions made in the lender's regular course of blic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kevin Romick

- 1, INCOME RECEIVED	➤ 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
USS-Posco Industries			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
900 Loveridge Rd, Pittsburg, Ca 94565			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
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		
Salary 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(Real property, car, boat, etc.)	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 of \$10,000 or more		
-	_		
(Describe)	(Describe)		
Other (Describe)	Other (Describe)		
➤ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE			
retail installment or credit card transaction, made in th	lending institutions, or any indebtedness created as part of a e lender's regular course of business on terms available to tatus. Personal loans and loans received not in a lender's ws:		
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)		
	% None		
ADDRESS (Business Address Acceptable)	Named		
	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		
\$10,001 - \$100,000	Guarantor		
OVER \$100,000	Other(Describe)		
Comments:			



Please type or print in ink.			Bγ	
NAME OF FILER (LAST)	(FIRST)		(MIDI	DLE)
Sultan	Deborah		G	•
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)	·			
City of Oakley				
Division, Board, Department, District, if applicable	- Branching	Your Position		
Finance		Finance Director		
▶ 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		Unidad or Court Commission	oner (Ctatawida Ivaledistis	\
_		☐ Judge or Court Commissk	•	•
Multi-County		County of		
☑ City of Oakley		Other		
3. Type of Statement (Check at least one box)				
Annual: The period covered is January 1, 2015, through	iah	I leaving Office: Date to	ıft/	
December 31, 2015.	-9"	(Check one)	III	
The period covered is/	, through	 The period covered is leaving office. 	January 1, 2015, through	the date of
Assuming Office: Date assumed		The period covered is the date of leaving off		, through
Candidate: Election year and	office sought, if dif	ferent than Part 1:		
BORNES BERNETT CONTROL				
4. Schedule Summary (must complete) ► Schedules attached	iotal number o	r pages including this cov	er page:	
Schedule A-1 - Investments - schedule attached				
Schedule A-2 - Investments – schedule attached		chedule C - Income, Loans, & B		iule attached
☐ Schedule B - Real Property – schedule attached	A Principal State of the Contract of the Contr	chedule D - Income - Gifts - sci	SHOUND THE SECOND SHOP IN A SECOND SHOP IN	
POT-	——————————————————————————————————————	chedule E - Income — Gifts — Tra	ivei Payments – schedule	attached
☑ None - No reportable interests on any sched	lule			
. Verification	uiv.		And the second s	And the second s
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE	
(Business or Agency Address Recommended - Public Document)			. Zii GODL	
3231 Main Street DAYTIME TELEPHONE NUMBER	Oakley	MAIL ADDRESS	94561	·
(925) 625-7010		ultan@ci.oakley.ca.us		
I have used all reasonable diligence in preparing this stateme herein and in any attached schedules is true and complete.	nt. I have reviewed	this statement and to the best of	my knowledge the informa	ation contained
I certify under penalty of perjury under the laws of the S			orrect	
		1 / 1971	4	
Date Signed 02/01/2016	Signa	iture Mella	<u> </u>	
(month, day, year)	J .		d statement with your filing official.)	