

RECEIVED  
CALIFORNIA POLITICAL  
PRACTICES COMMISSION  
**COVER PAGE**

MAR - 1 2010 *DD*

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*CG*

2010 MAR - 1 PM 5:14

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Wyland	Mark	Bryan	[REDACTED]
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE ZIP CODE
[REDACTED]			OPTIONAL: E-MAIL ADDRESS

**1. Office, Agency, or Court**

Name of Office, Agency, or Court:  
California Legislature

Division, Board, District, if applicable:  
State Senate

Your Position:  
Senator, 38th District

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

State

County of \_\_\_\_\_

City of \_\_\_\_\_

Multi-County \_\_\_\_\_

Other \_\_\_\_\_

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

Assuming Office/Initial Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2009.

Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)

The period covered is January 1, 2009, through the date of leaving office.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

Candidate Election Year: 2010

**4. Schedule Summary**

► Total number of pages including this cover page: 9

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1  Yes - schedule attached  
*Investments (Less than 10% Ownership)*

Schedule A-2  Yes - schedule attached  
*Investments (10% or Greater Ownership)*

Schedule B  Yes - schedule attached  
*Real Property*

Schedule C  Yes - schedule attached  
*Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)*

Schedule D  Yes - schedule attached  
*Income - Gifts*

Schedule E  Yes - schedule attached  
*Income - Gifts - Travel Payments*

-or-

No reportable interests on any schedule

**5. Verification**

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

Date Signed March 1, 2010

Signature: [REDACTED]

(I have personally signed statement with my name 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

Wyland, Mark B.

NAME OF BUSINESS ENTITY  
Enterprise Products Partners

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Partnership - Gas Pipelines

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income of \$0 - \$500  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
9 / 30 / 09      \_\_\_\_\_ / \_\_\_\_\_ / 09  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
Tortoise Energy Infrastructure Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Natural Gas Pipelines

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 Corporation (Describe)  
 Partnership       Income of \$0 - \$500  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
9 / 30 / 09      \_\_\_\_\_ / \_\_\_\_\_ / 09  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
Kinder Morgan Energy Partners

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Natural Gas Pipelines

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income of \$0 - \$500  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
9 / 30 / 09      \_\_\_\_\_ / \_\_\_\_\_ / 09  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
California GO Bonds - various

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Bonds

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 Bonds (Describe)  
 Partnership       Income of \$0 - \$500  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
10 / 15 / 09      \_\_\_\_\_ / \_\_\_\_\_ / 09  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
Linn Energy LLC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Natural Gas Pipelines

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 LLC (Describe)  
 Partnership       Income of \$0 - \$500  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
9 / 30 / 09      \_\_\_\_\_ / \_\_\_\_\_ / 09  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
United States Treasury Bonds

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Bonds

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 Bonds (Describe)  
 Partnership       Income of \$0 - \$500  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 09      6 / 10 / 09  
 ACQUIRED      DISPOSED

Comments:

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: Wyland, Mark B

NAME OF BUSINESS ENTITY: State of California Municipal Bonds
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Bonds
FAIR MARKET VALUE: Over \$1,000,000
NATURE OF INVESTMENT: Other Bonds

NAME OF BUSINESS ENTITY: Texas Industries
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Technology
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock

NAME OF BUSINESS ENTITY: United States Treasury Bonds
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Bonds
FAIR MARKET VALUE: Over \$1,000,000
NATURE OF INVESTMENT: Other Bonds

NAME OF BUSINESS ENTITY: D3 Fund
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Partnership - Investments
FAIR MARKET VALUE: \$100,001 - \$1,000,000
NATURE OF INVESTMENT: Partnership

NAME OF BUSINESS ENTITY: Money Market - various
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Money Funds
FAIR MARKET VALUE: Over \$1,000,000
NATURE OF INVESTMENT: Other Money Funds

NAME OF BUSINESS ENTITY: San Diego Unified School District
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Municipal Bonds
FAIR MARKET VALUE: \$100,001 - \$1,000,000
NATURE OF INVESTMENT: Other Bonds

Comments:



**SCHEDULE D**  
**Income – Gifts**

Name  
 Wyland, Mark B.

▶ NAME OF SOURCE  
Amgen  
 ADDRESS (Business Address Acceptable)  
601 13th St. NW, Washington, DC  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Health

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2 / 22 / 09</u>	<u>\$ 277.00</u>	<u>Hospitality tent for race</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
California Citrus Mutual  
 ADDRESS (Business Address Acceptable)  
512 N. Kaweah Ave., Exeter, CA 93221  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 17 / 09</u>	<u>\$ 6.00</u>	<u>Oranges</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Barona Band of Mission Indians  
 ADDRESS (Business Address Acceptable)  
1095 Barona Road, Lakeside, CA 92040  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Indian Tribe

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 13 / 09</u>	<u>\$ 113.00</u>	<u>Dinner</u>
<u>3 / 13 / 09</u>	<u>\$ 96.00</u>	<u>Lodging</u>
<u>3 / 13 / 09</u>	<u>\$ 24.00</u>	<u>Fruit and Chocolate</u>

▶ NAME OF SOURCE  
California Professional Firefighters  
 ADDRESS (Business Address Acceptable)  
1780 Creekside Oaks Dr., Sacramento, CA 95833  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Professional Trade Union

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2 / 3 / 09</u>	<u>\$ 21.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
California Chamber of Commerce  
 ADDRESS (Business Address Acceptable)  
1215 K St, 14th Floor, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Business Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5 / 19 / 09</u>	<u>\$ 11.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
California Rice Commission  
 ADDRESS (Business Address Acceptable)  
8801 Folsom Blvd, Ste. 172, Sacramento, CA 95826  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 9 / 09</u>	<u>\$ 31.00</u>	<u>Rice gift box</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income - Gifts**

Name  
 Wyland, Mark B.

▶ NAME OF SOURCE  
 California Tribal Business Alliance

ADDRESS (Business Address Acceptable)  
 1530 J St., Ste. 250, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Indian Affairs / Gaming

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 14 / 09	\$ 89.00	Dinner
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE  
 Del Mar Thoroughbred Club

ADDRESS (Business Address Acceptable)  
 P.O. Box 700, Del Mar, CA 02014

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Horseracing

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7 / 22 / 09	\$ 150.00	Admission
7 / 22 / 09	\$ 105.00	Buffet
7 / 22 / 09	\$ 20.00	Parking

▶ NAME OF SOURCE  
 California Correctional Peace Officers Assoc.

ADDRESS (Business Address Acceptable)  
 755 River Point Dr. # 200, West Sac., CA 95605

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Professional Trade Union

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4 / 22 / 09	\$ 159.00	Dinner
4 / 16 / 09	\$ 150.00	Dinner
/ /	\$	

▶ NAME OF SOURCE  
 Edwards Life Sciences

ADDRESS (Business Address Acceptable)  
 1 Edwards Way, Irvine, CA 92614

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Health

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 28 / 09	\$ 17.00	Dinner
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE  
 Consumers Union

ADDRESS (Business Address Acceptable)  
 1535 Mission St., San Francisco, CA 94103

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Consumer Group

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 1 / 09	\$ 26.00	Subscription
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE  
 Entertainment Software Association

ADDRESS (Business Address Acceptable)  
 575 7th St NW, Washington, DC 20004

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 30 / 09	\$ 22.00	Dinner
/ /	\$	
/ /	\$	

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income - Gifts**

Name  
 Wyland, Mark B.

▶ NAME OF SOURCE  
Genentech  
 ADDRESS (Business Address Acceptable)  
980 9th St., Ste 2180, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Health

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1 / 28 / 09</u>	<u>\$ 17.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Pfizer  
 ADDRESS (Business Address Acceptable)  
1201 K St., Ste. 1010, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Health

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1 / 28 / 09</u>	<u>\$ 17.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Johnson & Johnson  
 ADDRESS (Business Address Acceptable)  
1215 K St, Ste 2040, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Retail Sales

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1 / 28 / 09</u>	<u>\$ 16.00</u>	<u>Dinner/Reception</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Technology Assoc. of America  
 ADDRESS (Business Address Acceptable)  
601 Pennsylvania Ave NW #600, Wash. DC, 20004  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Technology

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5 / 13 / 09</u>	<u>\$ 10.00</u>	<u>Chocolate</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Miller Brewing  
 ADDRESS (Business Address Acceptable)  
3001 Douglas Blvd., #200, Roseville, CA 95661  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Beer and wine

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5 / 18 / 09</u>	<u>\$ 177.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Viejas Band of Kumeyaay Indians  
 ADDRESS (Business Address Acceptable)  
1 Viejas Grade Rd., Alpine, CA 91901  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Indian Tribe

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 14 / 09</u>	<u>\$ 40.63</u>	<u>Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
 Wyland, Mark B.

▶ NAME OF SOURCE  
Orange County Automotive Dealers Assoc.  
 ADDRESS (Business Address Acceptable)  
125 Baker St. East #262, Costa Mesa, CA 92626  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Auto Dealers

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 24 / 09</u>	<u>\$ 85.13</u>	<u>Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Life Technologies  
 ADDRESS (Business Address Acceptable)  
1050 K St. NW Ste. 310, Washington, DC 20001  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Health

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>8 / 17 / 09</u>	<u>\$ 21.11</u>	<u>Food and beverage</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Rod Wright for Senate  
 ADDRESS (Business Address Acceptable)  
P.O. Box 8542, L.A., CA 9008  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
CA Senate Campaign

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6 / 15 / 09</u>	<u>\$ 62.00</u>	<u>Wine bottle/glasses</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Southern California Edison  
 ADDRESS (Business Address Acceptable)  
2244 Walnut Grove Ave., Rosemead, CA 91770  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Utility

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 17 / 09</u>	<u>\$ 16.50</u>	<u>Holiday Ornament</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Barona Band of Mission Indians  
 ADDRESS (Business Address Acceptable)  
1095 Barona Road, Lakeside, CA 92040  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Indian Tribe

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7 / 9 / 09</u>	<u>\$ 97.51</u>	<u>Meal</u>
<u>12 / 7 / 09</u>	<u>\$ 39.99</u>	<u>Holiday Cookies</u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Various Healthcare/Life Sciences Entities  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Healthcare and Life Sciences

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1 / 28 / 09</u>	<u>\$ 216.88</u>	<u>Reception/Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
 Wyland, Mark B.

- Reminder – you must mark the gift or income box.
- You are not required to report income from government agencies.

▶ NAME OF SOURCE  
San Diego County Regional Airport Authority

ADDRESS (Business Address Acceptable)  
3225 North Harbor Drive

CITY AND STATE  
San Diego, CA 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
International Airport

DATE(S): 01/01/09 - 12/31/09 AMT: \$ 4,450.00  
 (If applicable)

TYPE OF PAYMENT: (must check one)  Gift  Income

DESCRIPTION: Annual Airport Parking

▶ NAME OF SOURCE  
 \_\_\_\_\_

ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_

CITY AND STATE  
 \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$ \_\_\_\_\_  
 (If applicable)

TYPE OF PAYMENT: (must check one)  Gift  Income

DESCRIPTION: \_\_\_\_\_

▶ NAME OF SOURCE  
 \_\_\_\_\_

ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_

CITY AND STATE  
 \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$ \_\_\_\_\_  
 (If applicable)

TYPE OF PAYMENT: (must check one)  Gift  Income

DESCRIPTION: \_\_\_\_\_

▶ NAME OF SOURCE  
 \_\_\_\_\_

ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_

CITY AND STATE  
 \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$ \_\_\_\_\_  
 (If applicable)

TYPE OF PAYMENT: (must check one)  Gift  Income

DESCRIPTION: \_\_\_\_\_

Comments: \_\_\_\_\_