

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
11 APR 13 PM 2:33

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MAR 18 2011  
CITY OF DIXON

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
BESNEATTE DAN O A

1. Office, Agency, or Court

Agency Name  
DIXON CITY COUNCIL COUNCILMEMBER  
Division, Board, Department, District, if applicable Your Position

► If filing for multiple positions, list below or on an attachment.

Agency: SEE ATTACHED Position:

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

State  Judge (Statewide Jurisdiction)  
 Multi-County  County of SOLANO  
 City of DIXON  Other

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

Annual: The period covered is January 1, 2010, through December 31, 2010.  
-or-  
The period covered is \_\_\_\_\_, through December 31, 2010.  
 Assuming Office: Date \_\_\_\_\_  
 Leaving Office: Date Left \_\_\_\_\_ (Check one)  
 The period covered is January 1, 2010, through the date of leaving office.  
 The period covered is \_\_\_\_\_, through the date of leaving office.  
 Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."  
► Total number of pages including this cover page: 4  
 Schedule A-1 - Investments - schedule attached  
 Schedule A-2 - Investments - schedule attached  
 Schedule B - Real Property - schedule attached  
 Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule D - Income - Gifts - schedule attached  
 Schedule E - Income - Gifts - Travel Payments - schedule attached  
-or-  
 None - No reportable interests on any schedule



I certify under penalty of perjury under the laws of the State of California that the  
Date Signed 3.18.2011 Signature

Attachment to Form 700 – Dane Besneatte

Expanded Statement includes:

Dixon Redevelopment Agency  
Dixon Public Finance Authority  
Dixon Public Improvement Corporation  
Dixon Solano Water Authority  
Vacaville Dixon Greenbelt Authority

**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  
DANE BESNEATTE

**1. BUSINESS ENTITY OR TRUST**

Name CURVES - DIXON  
 Address (Business Address Acceptable) 1910 N. LINCOLN STE 104 DIXON CA 95620  
 Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
HEALTH & FITNESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:    /   /10 ACQUIRED    /   /10 DISPOSED

NATURE OF INVESTMENT  
 Sole Proprietorship  Partnership  Other

YOUR BUSINESS POSITION NEW COMMUNITY PROPERTY

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$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.)**

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT  REAL PROPERTY

Name of Business Entity or CURVES - DIXON  
 Street Address or Assessor's Parcel Number of Real Property  
1910 LINCOLN, STE 104 DIXON CA 95620  
 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

IF APPLICABLE, LIST DATE:    /   /10 ACQUIRED    /   /10 DISPOSED

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership  
 Leasehold 3 Yrs. remaining  Other

Check box if additional schedules reporting investments or real property are attached

Comments: COMMUNITY PROPERTY INTEREST

**1. BUSINESS ENTITY OR TRUST**

Name Law Office of Dane A. Besneatte  
 Address (Business Address Acceptable) 100 N. Adams Ste C, Dixon, CA 95620  
 Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Law Office

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:    /   /10 ACQUIRED    /   /10 DISPOSED

NATURE OF INVESTMENT  
 Sole Proprietorship  Partnership  Other

YOUR BUSINESS POSITION OWNER

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$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.)**

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT  REAL PROPERTY

Name of Business Entity or Law Office of Dane A. Besneatte  
 Street Address or Assessor's Parcel Number of Real Property  
100 N. Adams, Ste C, Dixon, CA 95620  
 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

IF APPLICABLE, LIST DATE:    /   /10 ACQUIRED    /   /10 DISPOSED

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership  
 Leasehold     Yrs. remaining  Other MONTH TO MONTH

Check box if additional schedules reporting investments or real property are attached

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

▶ NAME OF SOURCE **MEYERS/NAVO**  
**555 Capitol Mall Ste 1200 SACRAMENTO**  
 ADDRESS (Business Address Acceptable) **CA 95814**  
**1555 Capitol Mall**  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Professional Law Corp**  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  
**5, 7, 10 \$9000 Baseball Tickets**

▶ NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

▶ NAME OF SOURCE  
**MEYERS - NAVO**  
 ADDRESS (Business Address Acceptable) **SACRAMENTO**  
**555 Capitol Mall Ste 1200 CA 95814**  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Professional Law Corp**  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  
**5, 7, 10 \$9000 Baseball Tickets**

▶ NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

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 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

▶ NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

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