

**STATEMENT OF ECONOMIC INTERESTS
 COVER PAGE**

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**CITY OF DUBLIN
 CITY MANAGER'S OFFICE**

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
HART	KEVIN	E

1. Office, Agency, or Court

Agency Name
 CITY OF DUBLIN

Division, Board, Department, District, if applicable
 Your Position
 COUNCILMEMBER

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

Agency: _____ Position: _____

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

<input type="checkbox"/> State	<input type="checkbox"/> Judge (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input type="checkbox"/> County of _____
<input checked="" type="checkbox"/> City of <u>DUBLIN</u>	<input type="checkbox"/> Other _____

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

<input checked="" type="checkbox"/> Annual: The period covered is January 1, 2010, through December 31, 2010. -or- The period covered is ____/____/____, through December 31, 2010.	<input type="checkbox"/> Leaving Office: Date Left ____/____/____ (Check one)
<input type="checkbox"/> Assuming Office: Date ____/____/____	<input type="radio"/> The period covered is January 1, 2010, through the date of leaving office.
<input type="checkbox"/> Candidate: Election Year _____ Office sought, if different than Part 1: _____	<input type="radio"/> The period covered is ____/____/____, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None." ► Total number of pages including this cover page: 1

<input type="checkbox"/> Schedule A-1 - Investments – schedule attached	<input type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached
<input type="checkbox"/> Schedule A-2 - Investments – schedule attached	<input type="checkbox"/> Schedule D - Income – Gifts – schedule attached
<input type="checkbox"/> Schedule B - Real Property – schedule attached	<input type="checkbox"/> Schedule E - Income – Gifts – Travel Payments – schedule attached

-or-

None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is a
 I certify under penalty of perjury under the laws of the State of California that

Date Signed 4/1/11 Signature _____
 (month, day, year)