

2011 MAR 25 AM 1:46

TOWN OF HILLSBOROUGH

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Krolik		Christine	McCrea

1. Office, Agency, or Court

Agency Name
Town of Hillsborough
 Division, Board, Department, District, if applicable
City Council
 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>Hillsborough</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="radio"/> The period covered is January 1, 2010, through the date of leaving office.
<input type="radio"/> The period covered is _____ through the date of leaving office. |
| <input type="checkbox"/> Assuming Office: Date ____/____/____ | |
| <input type="checkbox"/> 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: 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



I certify under penalty of perjury under the laws of the State of California that

Date Signed 2/10/11
 (month, day, year)

Signature