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OCEANSIDE CITY CLERK

Please type or print in ink.

11 APR -1 PM 3:12

NAME OF FILER (LAST) KERN (FIRST) JEROME (MIDDLE) M

1. Office, Agency, or Court

Agency Name
City of Oceanside
Division, Board, Department, District, if applicable
City Council
Your Position
Council Member

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

Agency: _____ Position: _____

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

- State Judge (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of Oceanside 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.
- 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.
- Assuming Office: Date ____/____/____
- 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: _____

- 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 have used all reasonable diligence in preparing this statement. I have reviewed the information herein and in any attached schedules is true and complete. I acknowledge this is true and correct. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3.17.11
(month, day, year)

Signature

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name

Jerome M. Kern

▶ NAME OF BUSINESS ENTITY
Manulife Financial Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Common Stock

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 Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

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

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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 Received of \$0 - \$499
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GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

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

Comments:

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST

Kern Family Trust
Name
645 Cable Ct, Oceanside, CA 92058
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

NATURE OF INVESTMENT
 Sole Proprietorship Partnership _____
Other

YOUR BUSINESS POSITION _____

▶ 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

645 Cable Ct
Name of Business Entity or
Street Address or Assessor's Parcel Number 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
 \$10,001 - \$100,000 / / 10 / / 10
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

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

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

▶ 1. BUSINESS ENTITY OR TRUST

Kern Family Trust
Name
3489 Peach Tree Way, Oceanside, CA 92058
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

NATURE OF INVESTMENT
 Sole Proprietorship Partnership _____
Other

YOUR BUSINESS POSITION _____

▶ 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

3489 Peach Tree Way
Name of Business Entity or
Street Address or Assessor's Parcel Number 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
 \$10,001 - \$100,000 / / 10 / / 10
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

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

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

Comments: _____

SCHEDULE D
Income - Gifts

Name
 Jerome M. Kern

▶ NAME OF SOURCE
Carlsbad Chamber of Commerce
 ADDRESS (Business Address Acceptable)
5934 Priestly Dr., Carlsbad, CA 92008
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Awards Dinner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2 / 26 / 10</u>	<u>\$ 125.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE
Metropolitan Water District
 ADDRESS (Business Address Acceptable)
700 N Alameda St., Los Angeles, CA 90012
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Tour local water facilities

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2 / 6 / 10</u>	<u>\$ 70.00</u>	<u>Bus transport & lunch</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE
MiraCosta College
 ADDRESS (Business Address Acceptable)
1 Barnard Dr., Oceanside, CA 92056
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Benefit for College Comm Service Youth Program

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4 / 24 / 10</u>	<u>\$ 45.00</u>	<u>Buffet</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE
Building Industry Association
 ADDRESS (Business Address Acceptable)
9201 Spectrum Ctr Bd #110, San Diego, CA 92123
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Installation Dinner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1 / 30 / 10</u>	<u>\$ 250.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE
O'side Chamber/Tri-City Hospital Sponsor
 ADDRESS (Business Address Acceptable)
4002 Vista Way, Oceanside, CA 92056
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Golfing with a hero - Guest of TriCity Hospital

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6 / 3 / 10</u>	<u>\$ 275.00</u>	<u>Golf & lunch</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE
22nd District Agricultural Association
 ADDRESS (Business Address Acceptable)
2260 Jimmy Durante Blvd., Del Mar, CA 92014
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Lunch & fair tickets

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6 / 23 / 10</u>	<u>\$ 35.00</u>	<u>Lunch & fair tickets</u>
<u>6 / 23 / 10</u>	<u>\$ 10.00</u>	<u>Parking</u>
<u> / / </u>	<u>\$</u>	<u></u>

Comments: _____