

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COVER PAGE

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
BRINKER TOBIN A

1. Office, Agency, or Court

Agency Name

CITY OF SAN BERNARDINO

Division, Board, Department, District, if applicable

CITY COUNCIL

Your Position

3RD WARD COUNCILMAN

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

Agency: _____

Position: _____

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

- State
- Multi-County _____
- City of SAN BERNARDINO
- Judge (Statewide Jurisdiction)
- County of _____
- 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 _____
- Candidate: Election Year _____ Office sought, if different than Part 1: _____
- 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.

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

5.

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

Date Signed 3/31/2011
(month, day, year)

Signature _____

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
TOBIN BRINKER

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
LATINO HEALTH COLLABORATIVE

ADDRESS (Business Address Acceptable)
1800 WESTERN AVE., SUITE 402, SB, CA 92411

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION
CONSULTANT

GROSS INCOME RECEIVED

\$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership

Sale of _____
 (Property, car, boat, etc.)

Commission or Rental Income, list each source of \$10,000 or more

Other _____
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

\$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership

Sale of _____
 (Property, car, boat, etc.)

Commission or Rental Income, list each source of \$10,000 or more

Other _____
 (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

| | | |
|---|---|---------------------|
| NAME OF LENDER* | INTEREST RATE | TERM (Months/Years) |
| _____ | _____ % <input type="checkbox"/> None | _____ |
| ADDRESS (Business Address Acceptable) | | |
| _____ | | |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | SECURITY FOR LOAN | |
| _____ | <input type="checkbox"/> None <input type="checkbox"/> Personal residence | |
| | <input type="checkbox"/> Real Property _____ | Street address |
| HIGHEST BALANCE DURING REPORTING PERIOD | | _____ |
| <input type="checkbox"/> \$500 - \$1,000 | | City |
| <input type="checkbox"/> \$1,001 - \$10,000 | | |
| <input type="checkbox"/> \$10,001 - \$100,000 | <input type="checkbox"/> Guarantor _____ | |
| <input type="checkbox"/> OVER \$100,000 | <input type="checkbox"/> Other _____ | (Describe) |

Comments: _____