

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
**STATEMENT OF ECONOMIC INTERESTS**  
11 JUN -9 PM 1:34  
COVER PAGE

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MAR 31 2011

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NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Robinson Lynn Marie

**1. Office, Agency, or Court**

Agency Name  
City of Santa Cruz  
Division, Board, Department, District, if applicable  
Your Position  
City Councilmember

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

Agency: AMBAG Position: Director

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

State  
 Multi-County Santa Cruz, Monterey, and San Benito  
 City of Santa Cruz  
 Judge (Statewide Jurisdiction)  
 County of Santa Cruz  
 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: 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

Date Signed 3/23/11 Signatur  
(month, day, year)

Continuation of Section #1 on Cover Page

Agency Name: Santa Cruz Metropolitan Transit District  
Position: Director

Agency Name: Santa Cruz Regional Transportation Commission  
Position: Commissioner



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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
 Lynn Marie Robinson

**1 INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
 John Robinson

ADDRESS (Business Address Acceptable)  
 1201 K Street, Suite 800/Sacramento, CA 95819

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 California Attractions & Parks Association

YOUR BUSINESS POSITION  
 CEO (Spouse is CEO)

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

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  
 \$1,001 - \$10,000  
 \$10,001 - \$100,000  
 OVER \$100,000

INTEREST RATE      TERM (Months/Years)

\_\_\_\_\_ %     None

SECURITY FOR LOAN  
 None     Personal residence  
 Real Property \_\_\_\_\_  
Street address  
 \_\_\_\_\_  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

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