

RECEIVED



STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE
11 APR -4 AM 11:28

Date Received
MAR 30 2011
CITY CLERKS OFFICE
CITY of TULARE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Vejvoda Craig M

1. Office, Agency, or Court

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

► If filing for multiple positions, list below or on an attachment.
Agency: Tulare County Association of Government Position: Member
Tulare County Transportation Authority member

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

State Judge (Statewide Jurisdiction)
 Multi-County _____ County of Tulare
 City of Tulare Other _____

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

Annual: The period covered is January 1, 2010, through December 31, 2010. Leaving Office: Date Left ____/____/____
-or- (Check one)
The period covered is ____/____/____, through December 31, 2010. The period covered is January 1, 2010, through the date of leaving office.
 Assuming Office: Date ____/____/____ The period covered is ____/____/____, through the date of leaving office.
 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: 5
 Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached
 Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached
 Schedule B - Real Property - 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 3/30/2011
(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.

<p>CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION</p> <p>Name <u>Craig Vejvoda</u></p>
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▶ NAME OF BUSINESS ENTITY
Galaxy Theatres Tulare

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Movie Theatre

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT LLC
 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
 Income Received of \$500 or More (Report on Schedule C)

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

▶ NAME OF BUSINESS ENTITY
Galaxy Theatres Gig Harbor

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Movie Theatre

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

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

IF APPLICABLE, LIST DATE:
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(Describe)
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 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 D
Income – Gifts

Name
 Craig Vejvoda

▶ NAME OF SOURCE
Omni Means
 ADDRESS (Business Address Acceptable)
309 W. Main St, Visalia, CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
TCAG One Voice trip to DC

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 24 / 10</u>	<u>\$ 110.00</u>	<u>Sponsor supper</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
Sempra Energy
 ADDRESS (Business Address Acceptable)
101 Ash St, San Diego, CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Customer Appreciation Dinner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 10 / 10</u>	<u>\$ 85.00</u>	<u>Sponsor supper</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
League of CA Cities, SSJV Division
 ADDRESS (Business Address Acceptable)
P.O. Box 10656, Bakersfield, CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Executive Board meetings

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 14 / 10</u>	<u>\$ 29.00</u>	<u>Supper</u>
<u>03 / 11 / 10</u>	<u>\$ 32.50</u>	<u>Supper</u>
<u>07 / 08 / 10</u>	<u>\$ 31.60</u>	<u>Supper</u>
<u>9 / 09 / 10</u>	<u>35.70</u>	<u>Supper</u>

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: _____