

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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 UPLAND CITY
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Willis Kenneth W.

1. Office, Agency, or Court

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

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

Agency: See Attached List Position: See Attached List

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

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

[Redacted Signature Area]

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

Date Signed 2-22-11 Signature _____
 (month, day, year)

SCHEDULE D
Income – Gifts

Name
Kenneth W. Willis

▶ NAME OF SOURCE
Smith Dawson & Andrews

ADDRESS (Business Address Acceptable)
1000 Connecticut Ave., NW, Washington DC 20036

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Lobbyist/Housing Authority

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 29 / 10</u>	<u>\$ 100</u>	<u>Dinner</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>
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<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: _____

EXPANDED LIST OF AGENCIES:

<u>AGENCY</u>	<u>POSITIONS</u>	<u>JURISDICTIONS</u>
Upland Redevelopment Agency	Member	Upland
Upland Public Finance Authority	Member	Upland
Upland Housing Authority	Member	Upland