

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A Public Document

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 FAIR POLITICAL PRACTICES COMMISSION
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Please type or print in Ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Haggerty Scott

1. Office, Agency, or Court

Agency Name
 Alameda County Board of Supervisor
 Division, Board, Department, District, if applicable
 District 1
 Your Position
 Supervisor
 ▶ If filing for multiple positions, list below or on an attachment.
 Agency: See Attached List Position: _____

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

State Judge (Statewide Jurisdiction)
 Multi-County See Attached List County of Alameda
 City of _____ Other Special District

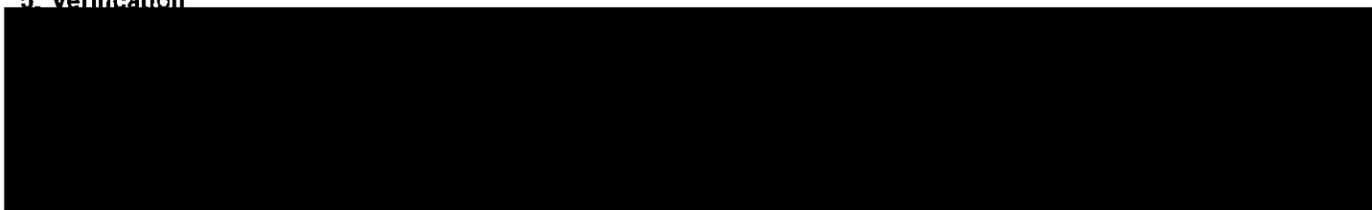
3. Type of Statement (Check at least one box)

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 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

5. Verification



herein and in any attached schedules is true and complete. I acknowledge
 I certify under penalty of perjury under the laws of the State of California
 Date Signed 2/25/13
 (month, day, year)

Alameda County Board of Supervisors
1221 Oak Street, Suite 536
Oakland, CA 94612

Altamont Commuter Express/San Joaquin Regional Rail
Commission (ACE)
949 East Channel Street
Stockton, CA 95202

Alameda County Transportation Authority (ACTA)
1333 Broadway, Suite 300
Oakland, CA 94612

Association of Bay Area Governments (ABAG)
101 Eighth Street
Oakland, CA 94607

Bay Area Air Quality Management District (BAAQMD)
939 Ellis Street,
San Francisco, CA 94109

East Bay Regional Communications System Authority
(EBRCS)
4985 Broder Blvd.
Dublin, CA 94568

Local Agency Formation Agency (LAFCO)
1221 Oak Street, Suite 555
Oakland, CA 94612

Livermore-Amador Valley Transportation Authority
(LAVTA)
1362 Rutan Court, Suite 100
Livermore, CA 94551

Oakland-Alameda County Coliseum Authority (JPA)
7000 Coliseum Way
Oakland, Ca 94621

Tri-Valley Transportation Council (TVTC)
c/o City of San Ramon
3180 Crow Canyon Place, Suite 140
San Ramon, CA 94583

Metropolitan Transportation Commission
101 Eighth Street
Oakland, CA 94607
Secretary Of State

Political Reform Division
1500 11th Street Room 495
Sacramento, California 95814

StopWaste.org
Pat Cabera
1537 Webster Street
Oakland, CA 94612

Tobacco Securitization Agency
C/O Jeff Bell
Placer County Executive Office
175 Fulweiler Avenue
Auburn CA 95603

Alameda County Transportation Improvement Authority
(ACTIA) MERGED with ACTC
1333 Broadway, Suite 300
Oakland, CA 94612

Alameda County Congestion Management Agency
(CMA) MERGED with ACTC
1333 Broadway, Suite 220
Oakland, CA 94612

Alameda County Transportation Commission (ACTC)
1333 Broadway, Suite 300
Oakland, CA 94612

Also on Distribution List:

Fair Political Practice Commission
Statement of Economic Interest Unit
428 J Street, Suite 620
Sacramento, CA 95814

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

▶ 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)

Comments: _____

▶ 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. LOAN RECEIVED

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
 Bill Herrison

ADDRESS (Business Address Acceptable)
 37272 Maple St Fremont, CA 94536

BUSINESS ACTIVITY, IF ANY, OF LENDER
 Accounting

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

INTEREST RATE _____ % None

TERM (Months/Years) _____

SECURITY FOR LOAN

None Personal residence

Real Property _____
 Street address _____
 City _____

Guarantor _____

Other _____
 (Describe)

Verification

Print Name Scott Haggerty Office, Agency or Court Alameda County Supervisor

Statement Type 2010/2011 Annual 10 Annual Assuming Leaving Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of _____

Date Signed 2/25/13
 (month, day, year)

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

▶ 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

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Loan repayment Partnership

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

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

Other _____
(Describe)

Comments: _____

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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

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

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(Describe)

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NAME OF LENDER
Mel Luna

ADDRESS (Business Address Acceptable)
11530 Padre Way Dublin, CA 94568

BUSINESS ACTIVITY, IF ANY, OF LENDER
Furniture

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

INTEREST RATE _____ % None

TERM (Months/Years) _____

SECURITY FOR LOAN

None Personal residence

Real Property _____
Street address

_____ City

Guarantor _____

Other _____
(Describe)

Verification

Print Name Scott Haggerty Office, Agency or Court Alameda County Supervisor

Statement Type 2010/2011 Annual 10 (yr) Annual Assuming Leaving Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

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Date Received
Official Use Only

COVER PAGE

FAIR POLITICAL PRACTICES COMMISSION

11 APR -1 PM 1:23

GP

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Haggerty Scott

1. Office, Agency, or Court

Agency Name

Alameda County

Division, Board, Department, District, if applicable

Board of Supervisor

Your Position

Supervisor

▶ if filing for multiple positions, list below or on an attachment.

Agency: See attached list

Position:

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

State

Multi-County

City of

Judge (Statewide Jurisdiction)

County of Alameda

Other Special District - JPA

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

Annual: The period covered is January 1, 2010, through December 31, 2010.

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4. Schedule Summary

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▶ Total number of pages including this cover page: 5

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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. Verification

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

Date Signed March 25, 2011
(month, day, year)

Signature

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1221 Oak Street, Suite 536
Oakland, CA 94612

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Oakland, CA 94607

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San Francisco, CA 94109

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Sacramento, CA 95814

SCHEDULE D
Income – Gifts

Name
Scott Haggerty

▶ NAME OF SOURCE
Butler Amusements/Alameda County Fair
 ADDRESS (Business Address Acceptable)
4501 Pleasanton Avenue Pleasanton, CA 94566
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fair - Entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 01 / 10</u>	<u>\$ 200.00</u>	<u>Fair Ride Passes</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
Young Market
 ADDRESS (Business Address Acceptable)
701 Atlantic Street Union City, CA 94587
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Spirit and wines distributor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 08 / 10</u>	<u>\$ 400</u>	<u>Sharks Tickets</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
Tony Vami
 ADDRESS (Business Address Acceptable)
650 "A" Street Hayward, CA 94543
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Lawyer

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 02 / 10</u>	<u>\$ 75</u>	<u>Christmas Wreath</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
DGC Operations
 ADDRESS (Business Address Acceptable)
333 S. Grand Avenue, 1570, Los Angeles, CA 9007
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Power development and generation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 01 / 10</u>	<u>\$ 100</u>	<u>Fruit and Cheese Plate</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
Oakland International Airport - Port of Oakland
 ADDRESS (Business Address Acceptable)
1 Airport Drive Oakland, CA 94621
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Airport

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 01 / 10</u>	<u>\$ 400</u>	<u>Parking pass</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>

Comments: Parking pass not used for personal use.