

STATEMENT OF ECONOMIC INTERESTS

Date Received
FEB 19 2013

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) CITY, COUNTY
Atkins Linda Kathyrene

1. Office, Agency, or Court

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

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

Agency: Redwood Coast Energy Authority Position: Boardmember

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

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of Eureka Other _____

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or- The period covered is _____ through December 31, 2012.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is _____ through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

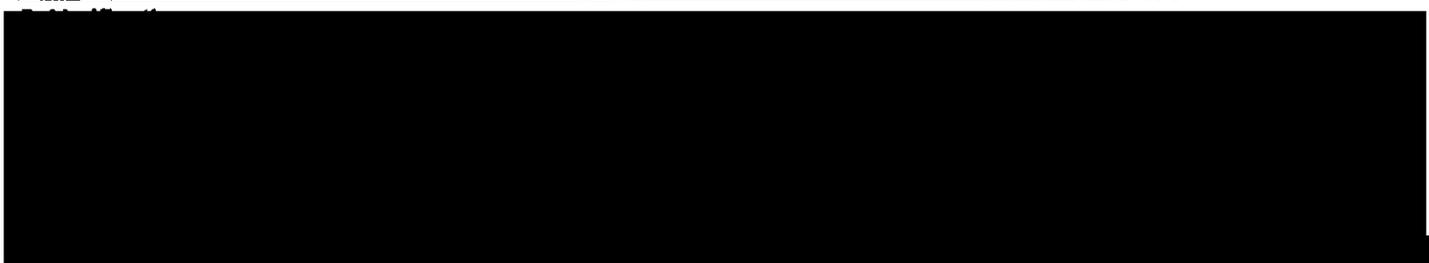
Check applicable schedules or "None."

► Total number of pages including this cover page: 2

- 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

Date Signed 2/19/13
(month, day, year)

RECEIVED

FEB 18 2014

CITY CLERK

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION

SCHEDULE D
2014 FEB 24 PM 2:12
Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

▶ NAME OF SOURCE (Not an Acronym)
Redwood Coast Music Fest.

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3, 12</u>	<u>\$ 80-</u>	<u>Jazz Fest Pass</u>
<u>9, 12</u>	<u>\$ 80-</u>	<u>Blues Fest Pass</u>
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Filer's Verification

Print Name Linda Atkins

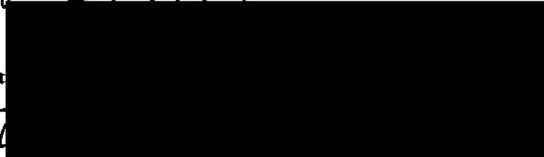
Office, Agency or Court City of Eureka

Statement Type 2012/2013 Annual Assuming Leaving
 Annual 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 California that the foregoing is true and correct.

Date Signed 2/7/14

Filer's Sign 

Comments: _____

SCHEDULE D
Income - Gifts

Name _____

▶ NAME OF SOURCE *(Not an Acronym)*
 Redwood Coast Music Festivals

ADDRESS *(Business Address Acceptable)*
 523 Fifth Street

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Music Festivals

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / / 12	\$ _____	Jazz Festival Tickets
09 / / 12	\$ _____	Blues Festival Tickets
/ / /	\$ _____	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ / /	\$ _____	
/ / /	\$ _____	
/ / /	\$ _____	

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/ / /	\$ _____	
/ / /	\$ _____	

Comments: _____