

STATEMENT OF ECONOMIC INTERESTS

RECEIVED Date Received
MAR 20 2013

COVER PAGE

Please type or print in ink.

T.M.

City Clerk's Office
S.

NAME OF FILER (LAST) ZAMORA (FIRST) SARAH

1. Office, Agency, or Court

Agency Name CITY OF COLTON
Division, Board, Department, District, if applicable
Your Position MAYOR

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

Agency: (SEE ATTACHED) Position: (SEE ATTACHED)

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

- State
- Multi-County
- City of COLTON
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of SAN BERNARDINO
- Other SEE ATTACHED

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: _____

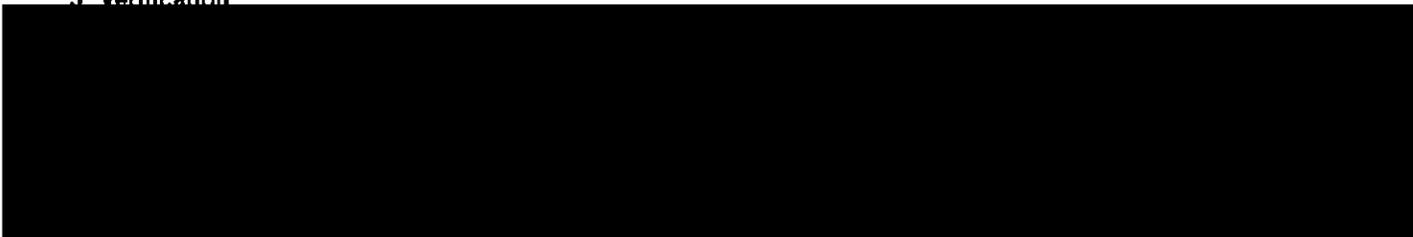
4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 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

5. Verification



I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/20/13
(month, day, year)

**DISCLOSURE STATEMENT RE
PROPERTY INTEREST WITHIN THE PROJECT AREA
OF THE INLAND VALLEY DEVELOPMENT AGENCY
AND THE SAN BERNARDINO INTERNATIONAL AIRPORT AUTHORITY**

I, _____, hereby state as follows:

1. I own certain property located within the Project Area as follows:

n/a

2. I additionally own other property located within 300 feet of said Project Area as follows:

n/a

3. I additionally own other property located more than 300 feet but within 2,500 feet of said Project Area as follows:

n/a

Dated: 3.20.13



Sarah S. Zamora
(Printed Name)

CALIFORNIA FORM 700
Fair Political Practices Commission

SARAH S. ZAMORA

Continuation Expanded Statement – List agency/position:

Agency: Colton Public Financing Authority

Position: Board Member

Agency: Colton Public Utilities Association

Position: Board Member

Agency: Successor Agency to the Redevelopment Agency

Position: Board Member

Agency: Colton Housing Authority

Position: Board Member

Agency: ICRMA (Independent Cities Risk Management Authority)

Position: Board Member

Agency: SBIAA (San Bernardino International Airport)

Position: Alternate Board Member

Agency: SCAG (So California Association of Governments)

Position: Alternate Board Member

**SCHEDULE D
Income - Gifts**

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
ZAMORA, SARAH

NOS
Comm

▶ NAME OF SOURCE (Not an Acronym)
Union Pacific R/R

ADDRESS (Business Address Acceptable)
Congressman Joe Baca Sr.

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Citizen Awards Dinner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10/19/12</u>	<u>\$ 75-</u>	<u>Dinner</u>
	\$	
	\$	

▶ NAME OF SOURCE (Not an Acronym)
Union Pacific R/R

ADDRESS (Business Address Acceptable)
Congresswoman Elect Dinner

BUSINESS ACTIVITY, IF ANY, OF SOURCE
395 S. Thomas St
Pomona Masonic Lodge, Pomona

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/11/12</u>	<u>\$ 75.00</u>	<u>Dinner</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)
	\$	
	\$	
	\$	

Comments: _____