

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Moody Larry James

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of East Palo Alto
Division, Board, Department, District, if applicable
City Council
Your Position
Council member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

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

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

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

- Annual: The period covered is January 1, 2013, through December 31, 2013.
-or-
The period covered is _____ through December 31, 2013.
- Assuming Office: Date assumed 02 / 05 / 2012
- Leaving Office: Date Left _____ (Check one)
 - The period covered is January 1, 2013, 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: 3

- 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

(d)(5)

(d)(5)

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

Date Signed 03/20/2014
(month, day, year)

Signature

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
LARRY MOODY

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Star Vista

ADDRESS (Business Address Acceptable)
610 Elm # 321

BUSINESS ACTIVITY, IF ANY, OF SOURCE
San Carlos 94070

YOUR BUSINESS POSITION
Childhood Parent Educator

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 _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Unity Care Group

ADDRESS (Business Address Acceptable)
237 Race St

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non Profit Corporation

YOUR BUSINESS POSITION
Community Outreach Specialist

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 _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* 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* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

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)

Comments: _____



**STATEMENT OF ECONOMIC INTERESTS
 COVER PAGE
 A PUBLIC DOCUMENT**

Date Received
OFFICE USE ONLY

CITY OF EPA '14 FEB 21 PM 2:37

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Moody Larry James

1. Office, Agency, or Court

Agency Name
 City of East Palo Alto- Council
 Division, Board, Department, District, if applicable
 City Council
 Your Position
 Council member

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

Agency: _____ Position: _____

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

- State
- Multi-County _____
- City of East Palo Alto
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- 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 ____/____/____
- Candidate: Election Year _____ and office sought, if different than Part 1: _____
- Leaving Office: Date Left ____/____/____ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is 12 / 30 / 2012, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

- 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

(d)(5)

herein and in any attached schedules is true and complete. I acknowledge this is a public document.

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

Date Signed 12/31/13
(month, day, year)

Signer

(d)(5)

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
LARRY MOODY

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
STAY VISTA

ADDRESS (Business Address Acceptable)
610 ELM # 321

BUSINESS ACTIVITY, IF ANY, OF SOURCE
San Carlos 94070

YOUR BUSINESS POSITION
Early Childhood Parent Educator

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 _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Unity Care Group

ADDRESS (Business Address Acceptable)
237 Race St

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non Profit Corporation

YOUR BUSINESS POSITION
Community Outreach Specialist

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 _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* 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* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

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)

Comments: _____

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

CITY OF EPA 12 DEC 18 AM 10:41

Please type or print in ink.

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

MOODY

LARRY

James

1. Office, Agency, or Court

Agency Name: City of EAST PALO ALTO
Your Position: Council Member

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

Agency: Position:

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

- State, Multi-County, City of EAST PALO ALTO, Judge or Court Commissioner, County of, Other

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

- Annual, Assuming Office: Date assumed 12, 04, 2012, Candidate: Election Year 2012, Leaving Office, The period covered is January 1, 2011, through the date of leaving office.

4. Schedule Summary

- Schedule A-1, A-2, B, C (checked), D, E, None - No reportable interests on any schedule

Total number of pages including this cover page: 7



I certify under penalty of perjury under the laws of the State of California that
Date Signed 12/12/12 (month, day, year) Signature

