



STATEMENT OF ECONOMIC INTERESTS

TN

RECEIVED COVER PAGE FAIR POLITICAL PRACTICES COMMISSION

Date Received 03-19-13

Please type or print in ink.

NAME OF FILER Oker Wf (Oker) 2013 APR -8 PM 2:41

1. Office, Agency, or Court

Agency Name City of Alameda Council Member

If filing for multiple positions, list below or on an attachment. Agency: Hospital Board 2 Alameda Position: Board Member

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

State Multi-County City of Alameda 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 4/17/12 through December 31, 2012. Leaving Office: Date Left The period covered is January 1, 2012, through the date of leaving office. Assuming Office: Date assumed 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 None - No reportable interests on any schedule

5. [Redacted]

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 3-19-13 (month, day, year)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name Olson

SCHEDULE D
Income - Gifts

▶ NAME OF SOURCE (Not an Acronym)
Best Best Krieger
 ADDRESS (Business Address Acceptable)
500 Capitol Mall SAC CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Attorney

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------------|------------------------|
| <u>9/7/12</u> | <u>\$115.59</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) |
|-----------------|----------|------------------------|
| ___/___/___ | \$ _____ | _____ |
| ___/___/___ | \$ _____ | _____ |
| ___/___/___ | \$ _____ | _____ |

▶ 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: _____

SCHEDULE C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name Olsen

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Santa Catalina Island Co

ADDRESS (Business Address Acceptable)
Box 737

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Note Towns Real Estate

YOUR BUSINESS POSITION
Consultant

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

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 _____
(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 TERM (Months/Years)

_____ % None

SECURITY FOR LOAN

None Personal residence

Real Property _____
Street address

City

Guarantor _____

Other _____
(Describe)

Comments: _____



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Katey Lamke
(916) 329-3680
katey.lamke@bbklaw.com

November 28, 2012

Re: Valuation of the September 6, 2012 BB&K Hosted Dinner.

We hope you enjoyed sharing an evening with us in San Diego. We are glad that you were able to join us.

Under the FPPC regulations for reporting gifts on Form 700, you may need to report the value of the dinner, which is your “pro-rata share” of the cost of the event. According to FPPC Regulations section 18946.2, for “invitation-only” events, such as our dinner, a public official’s “pro rata share” of the cost of the event means: “the cost of all food and beverages, rent of the facilities, decorations, entertainment, and all other costs associated with the event, divided by the number of acceptances or the number of attendees.”

Based on this FPPC regulation, we have calculated the value of the dinner to be **\$115.59** per person. If a guest accompanied you at the dinner, the value of his/her dinner is also attributable to you as a gift and is required to be reported on your Form 700.

If you have questions about reporting this information on your Form 700, please don’t hesitate to contact us.

Sincerely,

Katey Lamke
Marketing Events Coordinator
for BEST BEST & KRIEGER LLP

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