

RECEIVED  
STATEMENT OF ECONOMIC INTERESTS  
APR 08 2013  
COVER PAGE

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Date Received  
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APR - 1 2013

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Please type or print in ink.

NAME OF FILER (LAST) COSTA (FIRST) ASHLEY CITY OF LOMPOC CLERK'S OFFICE EVELYN

1. Office, Agency, or Court

Agency Name City of Lompoc  
Division, Board, Department, District, if applicable  
Your Position City 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  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of \_\_\_\_\_
- City of Lompoc  Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- or-  The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2012.  The period covered is January 1, 2012, through the date of leaving office.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  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: \_\_\_\_\_
- 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  
[Redacted Signature Area]

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

Date Signed 4/1/2013  
(month, day, year)

# Which Schedule Do I Use?

## Common Reportable Interests

- Schedule A-1: Stocks, including those held in an IRA or a 401K
- Schedule A-2: Business entities (including certain independent contracting), sole proprietorships, partnerships, LLCs, corporations, and trusts
- Schedule B: Rental property in the jurisdiction
- Schedule C: Non-governmental salaries of public official and spouse/registered domestic partner
- Schedule D: Gifts from non-family members (such as tickets to sporting or entertainment events)
- Schedule E: Travel payments from third parties (not your employer)

## Common Non-Reportable Interests

- Schedule A-1/A-2: Insurance policies, government bonds, diversified mutual funds, certain funds similar to diversified mutual funds (such as exchange traded funds) and investments held in certain retirement accounts. See Reference Pamphlet, page 12, for detailed information. (Regulation 18237)
- Schedule A-1/A-2: Savings and checking accounts and annuities
- Schedule B: A residence used exclusively as a personal residence (such as a home or vacation cabin)
- Schedule C: Governmental salary (such as a school district)
- Schedule D: Gifts from family members
- Schedule E: Travel paid by your government agency

## Remember:

- ✓ Mark the "No reportable interests" box on Part 4 of the Schedule Summary on the Cover Page if you determine you have nothing to disclose and file the Cover Page only. **Make sure you carefully read all instructions to ensure proper reporting.**
- ✓ The Form 700 is a public document.
- ✓ **Most individuals must consult their agency's conflict-of-interest code for reportable interests.**
- ✓ Most individuals file the Form 700 with their agencies.



**SCHEDULE D**  
**Income - Gifts**

▶ NAME OF SOURCE (Not an Acronym)  
Healthy Lompoc Coalition  
 ADDRESS (Business Address Acceptable)  
1593 E. Chestnut Ave Lompoc, CA 93436  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Community Health Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$ 50</u>	<u>Lunch</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </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)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)  
Aleshire & Wynder, L.L.P.  
 ADDRESS (Business Address Acceptable)  
2361 Rosecrans Ave, Suite 475  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE El Segundo, CA 90245  
City Attorney

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/20/12</u>	<u>\$ 54.95</u>	<u>Dinner</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </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)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)  
League of California Cities  
 ADDRESS (Business Address Acceptable)  
1400 K St. Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Policy Committee

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/19/12</u>	<u>\$ 21.54</u>	<u>Meals</u>
<u>3/29/12</u>	<u>\$ 42.71</u>	<u>Meals</u>
<u>6/4/12</u>	<u>\$ 15.47</u>	<u>Meals</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)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

Comments: Healthy Lompoc Coalition lunch is a cumulative total of 5 lunches costing \$10 each