

STATEMENT OF ECONOMIC INTERESTS

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FAIR POLITICAL  
PRACTICES COMMISSION  
COVER PAGE

FEB 25 2013

Please type or print in ink.

2010 APR 11 1:09 PM

BY: *H. Sierra*

NAME OF FILER (LAST) Brennan (FIRST) Michael (MIDDLE) Patrick

1. Office, Agency, or Court

Agency Name  
Stanislaus County  
Division, Board, Department, District, if applicable  
EDAC  
Your Position  
Board Member

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

Agency: Oakdale City Council  
Oakdale Redevelopment Agency  
Position: Council Member  
- member

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

- State
- Multi-County
- City of Oakdale
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of Stanislaus
- 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)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, 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: 2
- 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
- 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 02/15/2013  
(month, day, year)

[Redacted Signature Area]

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

Name  
**Michael Patrick Brennan**

▶ NAME OF SOURCE (Not an Acronym)  
**Siemens Industry**

ADDRESS (Business Address Acceptable)  
**25821 Industrial Blvd, Ste 300, Hayward CA 94545**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Meeting**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03</u> / <u>14</u> / <u>12</u>	\$ <u>10</u>	<u>Dinner</u>
<u>05</u> / <u>23</u> / <u>12</u>	\$ <u>16</u>	<u>Lunch</u>
<u>12</u> / <u>07</u> / <u>12</u>	\$ <u>40</u>	<u>Dinner</u>

▶ NAME OF SOURCE (Not an Acronym)  
**SCOE**

ADDRESS (Business Address Acceptable)  
**1100 H Street, Modesto CA 95354**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Meeting**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03</u> / <u>01</u> / <u>12</u>	\$ <u>25</u>	<u>ROP-CTE Lunch</u>
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**AT&T, Siemens, PG&E**

ADDRESS (Business Address Acceptable)  
**California**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Meeting**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03</u> / <u>08</u> / <u>12</u>	\$ <u>25</u>	<u>L of C Division Dinner</u>
<u>12</u> / <u>13</u> / <u>12</u>	\$ <u>27</u>	<u>L of C Division Dinner</u>
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Local Government Commission**

ADDRESS (Business Address Acceptable)  
**1303 J Street, Ste 250, Sacramento CA 95814**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Meeting**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12</u> / <u>06</u> / <u>12</u>	\$ <u>23</u>	<u>Dinner</u>
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**California League of Cities**

ADDRESS (Business Address Acceptable)  
**1400 K Street, Sacramento, CA 95814**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Meeting**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01</u> / <u>20</u> / <u>12</u>	\$ <u>17</u>	<u>EQ Committee Lunch</u>
<u>03</u> / <u>29</u> / <u>12</u>	\$ <u>16</u>	<u>EQ Comm Lunch</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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: \_\_\_\_\_