

STATEMENT OF ECONOMIC INTERESTS

RECEIVED
CITY OF YUCAIPA

Date Received
MAR 19 2013

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FAIR POLITICAL
PRACTICES COMMISSION
COVER PAGE

GENERAL SERVICES/CITY CLERK'S

Please type or print in ink.

SR

NAME OF FILER (LAST) Masner, (FIRST) Tom (MIDDLE)

1. Office, Agency, or Court

Agency Name
City of Yucaipa
Division, Board, Department, District, if applicable
Your Position
Council Member

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

Agency: Yucaipa Housing Authority / SB Muni Water Position: Board Member / Advisory Board Member

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

State Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of Yucaipa, California 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 _____
 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: _____**

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



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

Date Signed 01/31/2013
(month, day, year)



**SCHEDULE D
 Income – Gifts**

Name
Mr. Tom Masner

▶ NAME OF SOURCE *(Not an Acronym)*
Burrtec Waste Industries Inc.

ADDRESS *(Business Address Acceptable)*
9890 Cherry Avenue, Fontana, CA 92335

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Waste Disposal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 25 / 12	\$ 125.00	2 Tickets, Sport Event
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____