



**STATEMENT OF ECONOMIC INTERESTS**

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CITY CLERK DEPARTMENT  
 CITY OF THOUSAND OAKS

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NAME OF FILER (LAST) PRICE (FIRST) (MIDDLE)  
 PRICE JOEL CITY CLERK DEPARTMENT  
 CITY OF THOUSAND OAKS

**1. Office, Agency, or Court**

Agency Name  
 CITY OF THOUSAND OAKS  
 Division, Board, Department, District, if applicable  
 CITY COUNCIL  
 Your Position  
 COUNCILMEMBER (3/27/12 - 12/31/12)

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

Agency: CITY OF THOUSAND OAKS Position: PLANNING COMMISSIONER (1/1-3/9/12)

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

- State
- Multi-County \_\_\_\_\_
- City of THOUSAND OAKS
- 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 \_\_\_\_/\_\_\_\_/\_\_\_\_
- 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**

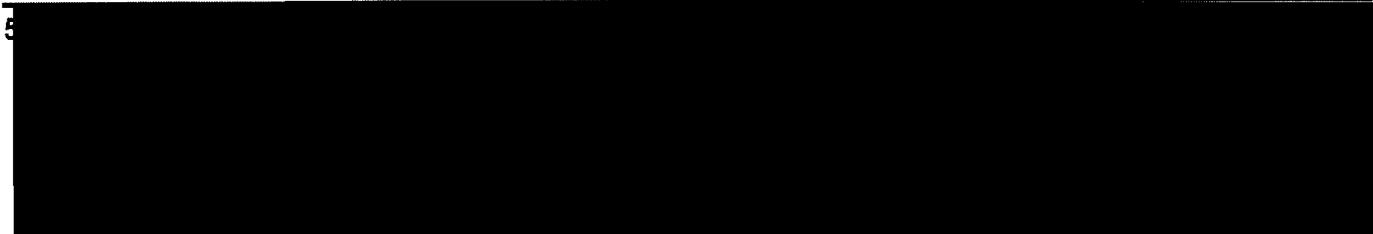
Check applicable schedules or "None."

► Total number of pages including this cover page: 2

- 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**



herein and in any attached schedules is true and complete. I acknowledge that I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/25/13  
 (month, day, year)

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

Name  
 Joel Price

▶ NAME OF SOURCE (Not an Acronym)

Best Best & Krieger LLP

ADDRESS (Business Address Acceptable)

300 S. Grand Ave., 25th Floor, L.A. CA 90071

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Law Firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 06 / 12	\$ 231	Annual Client Dinner
/ /	\$	for self and spouse
/ /	\$	

▶ 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: \_\_\_\_\_