

STATEMENT OF ECONOMIC INTERESTS

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MAR 20 2014

COVER PAGE



**CITY CLERK
CITY OF EMERYVILLE**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Asher Jacqueline Colleen

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Emeryville
Division, Board, Department, District, if applicable
City Council
Your Position
Councilmember/Mayor

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Attached Position:

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

State Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County County of Alameda
 City of Emeryville Other

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FAIR POLITICAL
PRACTICES COMMISSION
2014 APR 17 PM 4:15

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

Annual: The period covered is January 1, 2013, through December 31, 2013.
-or-
The period covered is _____ through December 31, 2013.
 Assuming Office: Date assumed _____
 Leaving Office: Date Left _____ (Check one)
 The period covered is January 1, 2013, 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

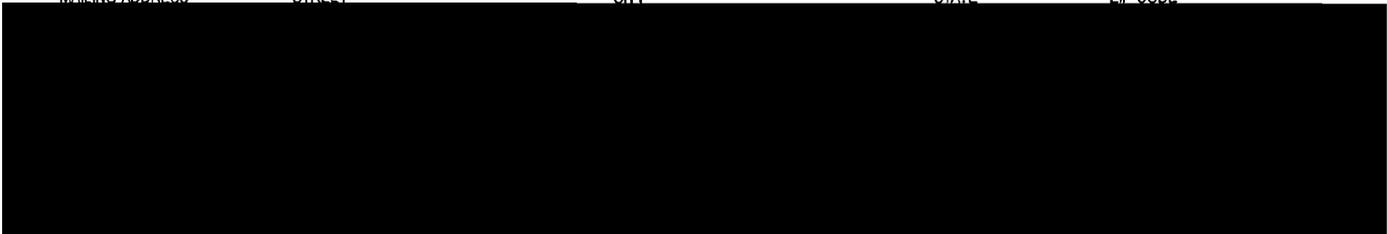
Check applicable schedules or "None."

► Total number of pages including this cover page: 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
-or-
 None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE



Date Signed 03/18/2014
(month, day, year)



SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name Asher, Jacqueline

▶ NAME OF SOURCE *(Not an Acronym)*
Emeryville Chamber of Commerce

ADDRESS *(Business Address Acceptable)*
3980 Harlan Street, Emeryville, CA 94608

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Lobby for Chamber members

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 23 / 13	\$ 85.00	luncheon/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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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: _____

Attachment for Form 700

List of Agencies

- City of Emeryville, City Council
- Community Development Commission of Emeryville
- Management of Emeryville Services Authority, Public Financing Authority
- City Council of the City of Emeryville as Successor Agency to the Emeryville Redevelopment Agency
- Housing Authority of the County of Alameda, Housing Commission

City of Emeryville Advisory Committees:

- City of Emeryville, Bicycle Pedestrian Advisory Committee
- City of Emeryville, Emeryville Child Development Advisory Committee
- City of Emeryville, Finance Committee
- City of Emeryville, Housing Committee
- City of Emeryville, Technology Committee