

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Campbell Cody W

1. Office, Agency, or Court

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

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

Agency: See Attachment Position: _____

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 FAIR POLITICAL PRACTICES COMMISSION
 2014 APR -3 PM 1:28

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

- State
- Multi-County _____
- City of Vista
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of San Diego
- Other Buena Sanitation District

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 12 / 04 / 2012, through December 31, 2013.
- Assuming Office:** Date assumed _____
- Candidate:** Election year _____ and office sought, if different than Part 1: _____
- Leaving Office:** Date Left 12 / 10 / 2013
 (Check one)
- The period covered is January 1, 2013, through the date of leaving office.
- The period covered is 12 / 04 / 2012, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 6

- 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. [Redacted Signature Area]

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

Date Signed 3-31-2014
(month, day, year)

FORM 700 ATTACHMENT

Cody Campbell

Buena Sanitation District – Board Member

North County Transit District – Alternate Board Member (*Leaving Office Statement*)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

Name

Cody Campbell

▶ 1. BUSINESS ENTITY OR TRUST

Campbell Campaign Services

Name

2210 East Vista Way, STE 6 / Vista CA 92084

Address (Business Address Acceptable)

Check one

- Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

Direct Mail / Print Sales

FAIR MARKET VALUE

- \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/13 ____/____/13
 ACQUIRED DISPOSED

NATURE OF INVESTMENT

- Partnership Sole Proprietorship LLC Other

YOUR BUSINESS POSITION Owner

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- \$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

John A. Coleman, D.D.S., Inc (Coleman Dentistry)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

- INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE

- \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/13 ____/____/13
 ACQUIRED DISPOSED

NATURE OF INTEREST

- Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one

- Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

- \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/13 ____/____/13
 ACQUIRED DISPOSED

NATURE OF INVESTMENT

- Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- \$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

- INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE

- \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/13 ____/____/13
 ACQUIRED DISPOSED

NATURE OF INTEREST

- Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE D
Income – Gifts

Name
Cody Campbell

▶ NAME OF SOURCE (Not an Acronym)
YGRENE ENERGY FUND c/o Crystal Crawford
 ADDRESS (Business Address Acceptable)
11199 Sorrento Valley Rd., Suite 209 San Diego, CA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Clean Energy San Diego

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 06 / 12</u>	\$ <u>60.00</u>	<u>SDNEDC Annual</u>
<u> / / </u>	\$ <u> </u>	<u>Business Lunch</u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Vista Fire Fighters Association IAFF Local 4107
 ADDRESS (Business Address Acceptable)
P.O. Box 1119, Vista, CA 92085-1119
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fire Fighters

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 19 / 12</u>	\$ <u>50.00</u>	<u>Holiday Gift Basket</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
EDCO, Jeff Ritchie, Vice President
 ADDRESS (Business Address Acceptable)
2234 S. Los Posas, San Marcos, CA 92078
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Recycling & Waste Collection Services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 28 / 13</u>	\$ <u>30.00</u>	<u>State of the</u>
<u> / / </u>	\$ <u> </u>	<u>Community Chamber</u>
<u> / / </u>	\$ <u> </u>	<u>Lunch</u>

▶ NAME OF SOURCE (Not an Acronym)
Vista Chamber of Commerce Meet the Leaders
 ADDRESS (Business Address Acceptable)
127 Main Street, Vista, CA 92084
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Promote Business

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 22 / 13</u>	\$ <u>65.00</u>	<u>Reception & Dinner</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Cox Communications - Chamber Sponsor
 ADDRESS (Business Address Acceptable)
5159 Federal Blvd. San Diego, CA 92105
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
T.V., Cable, Internet Service Provider

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 19 / 13</u>	\$ <u>65.00</u>	<u>Dinner HEROES</u>
<u> / / </u>	\$ <u> </u>	<u>Event</u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Vista Fire Fighters Association #4107
 ADDRESS (Business Address Acceptable)
P.O. Box 1119, Vista, CA 92085
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fire Fighters

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 16 / 13</u>	\$ <u>125.00</u>	<u>Burn Institute Banquet</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

Comments: _____

SCHEDULE D
Income – Gifts

Name
Cody Campbell

▶ NAME OF SOURCE (Not an Acronym)
Moonlight Cultural Foundation
 ADDRESS (Business Address Acceptable)
P.O. Box 2497 Vista, CA 92085
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Opening Night of South Pacific /Sponsor Appreciation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 26 / 13</u>	<u>\$ 160.00</u>	<u>Dinner & Theatre</u>
<u> / / </u>	<u> </u>	<u>2 Tickets</u>
<u> / / </u>	<u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
San Diego County Fair
 ADDRESS (Business Address Acceptable)
2260 Jimmy Durante Blvd. Del Mar, CA 92014
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Leadership Luncheon & Fair

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 26 / 13</u>	<u>\$ 150.00</u>	<u>Parking, Lunch & Fair</u>
<u> / / </u>	<u> </u>	<u> </u>
<u> / / </u>	<u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
San Diego County Regional Airport Authority
 ADDRESS (Business Address Acceptable)
3225 N Harbor Dr. San Diego CA 92101
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Regional Airport

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 08 / 13</u>	<u>\$ 198.50</u>	<u>Joint Venture Partner</u>
<u> / / </u>	<u> </u>	<u>Green Build Exhibition</u>
<u> / / </u>	<u> </u>	<u>2 tickets & 2 keepsakes</u>

▶ NAME OF SOURCE (Not an Acronym)
Turner/PCL/Flatiron, A Joint Venture
 ADDRESS (Business Address Acceptable)
2417 McCain Rd., Suite 120, San Diego, CA 92101
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Design Builder/Construction

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 08 / 13</u>	<u>\$ 198.50</u>	<u>Joint Venture Partner</u>
<u> / / </u>	<u> </u>	<u>Green Build Exhibition</u>
<u> / / </u>	<u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Kiewit/Sundt Joint Venture
 ADDRESS (Business Address Acceptable)
12700 Stowe Drive, Suite 180, Poway, CA 92064
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Design Builder/Construction

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 08 / 13</u>	<u>\$ 198.50</u>	<u>Joint Venture Partner</u>
<u> / / </u>	<u> </u>	<u>Green Build Exhibition</u>
<u> / / </u>	<u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Asian Business Assoc. of San Diego & California
 ADDRESS (Business Address Acceptable)
Asian Pacific Chamber, 7675 Daggert St., Suite 340,
San Diego, CA - Business Summit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 19 / 13</u>	<u>\$ 80.00</u>	<u>Summit Gala</u>
<u> / / </u>	<u> </u>	<u> </u>
<u> / / </u>	<u> </u>	<u> </u>

Comments: _____

SCHEDULE D
Income – Gifts

Name
 Cody Campbell

▶ NAME OF SOURCE *(Not an Acronym)*
 Vista Firefighters IAAF Local 4107

ADDRESS *(Business Address Acceptable)*
 PO Box 1119, Vista CA 92085-1119

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Fire Fighters Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 16 / 13	\$ 60.00	Holiday Gift Basket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: _____