



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) SAN DIEGO, CALIF. (MIDDLE) Cole, Myrtle Redd

1. Office, Agency, or Court

Agency Name (Do not use acronyms) CITY OF SAN DIEGO Division, Board, Department, District, if applicable Councilmember Your Position Councilmember District 4

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

Agency: Position:

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

- State Multi-County City of San Diego Judge or Court Commissioner (Statewide Jurisdiction) County of Other

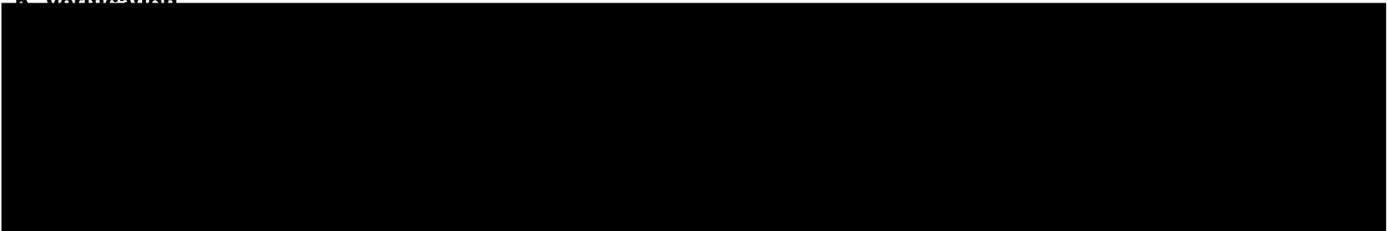
3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2013, through December 31, 2013 -or- The period covered is through December 31, 2013 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. 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: 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 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 02/28/2014 (month, day, year)

# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Cole, Myrtle Redd

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
United Domestic Workers of America Local 3930

ADDRESS (Business Address Acceptable)  
2760 5th Ave, Ste 300  
San Diego, CA 92103

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Homecare Providers Union

YOUR BUSINESS POSITION  
Regional Coordinator

GROSS INCOME RECEIVED  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary       Spouse's or registered domestic partner's income  
 Loan repayment       Partnership  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Commission or  Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

YOUR BUSINESS POSITION  
\_\_\_\_\_

GROSS INCOME RECEIVED  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary       Spouse's or registered domestic partner's income  
 Loan repayment       Partnership  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Commission or  Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  
 \$1,001 - \$10,000  
 \$10,001 - \$100,000  
 OVER \$100,000

INTEREST RATE      TERM (Months/Years)

\_\_\_\_\_ %       None      \_\_\_\_\_

SECURITY FOR LOAN  
 None       Personal residence  
 Real Property \_\_\_\_\_  
Street address  
\_\_\_\_\_  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

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

## SCHEDULE D Income - Gifts

|                                     |
|-------------------------------------|
| <b>CALIFORNIA FORM 700</b>          |
| FAIR POLITICAL PRACTICES COMMISSION |
| Name _____                          |
| Cole, Myrtle Redd                   |

▶ NAME OF SOURCE (Not an Acronym)

Run Women Run

ADDRESS (Business Address Acceptable)  
9710 Scranton Rd Ste 16  
San Diego, CA 92121

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Women's Organization

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)           |
|---------------------|------------------|----------------------------------|
| <u>05 / 09 / 13</u> | <u>\$ 150.00</u> | <u>Planned Parenthood Dinner</u> |
| <u>05 / 04 / 13</u> | <u>\$ 125.00</u> | <u>Roosevelt Dinner</u>          |
| <u>  /  /  </u>     | <u>\$</u>        | <u> </u>                         |

▶ NAME OF SOURCE (Not an Acronym)

Clara Carter

ADDRESS (Business Address Acceptable)  
6161 El Cajon Blvd Suite 443  
San Diego, CA 92115

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>06 / 04 / 13</u> | <u>\$ 65.00</u> | <u>Plant</u>           |
| <u>  /  /  </u>     | <u>\$</u>       | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>       | <u> </u>               |

▶ NAME OF SOURCE (Not an Acronym)

Municipal Employees Association

ADDRESS (Business Address Acceptable)  
9620 Chesapeake Dr Suite 203  
San Diego, CA 92123

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Labor Organization

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)    |
|---------------------|-----------------|---------------------------|
| <u>06 / 04 / 13</u> | <u>\$ 50.00</u> | <u>Flower Arrangement</u> |
| <u>  /  /  </u>     | <u>\$</u>       | <u> </u>                  |
| <u>  /  /  </u>     | <u>\$</u>       | <u> </u>                  |

▶ NAME OF SOURCE (Not an Acronym)

Interfaith Committee for Worker Justice  
of San Diego County

ADDRESS (Business Address Acceptable)  
3758 30th Street  
San Diego, CA 92108

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Committee for Workers

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)       |
|---------------------|-----------------|------------------------------|
| <u>12 / 04 / 13</u> | <u>\$ 85.00</u> | <u>ICWJ Anniversary Gala</u> |
| <u>  /  /  </u>     | <u>\$</u>       | <u> </u>                     |
| <u>  /  /  </u>     | <u>\$</u>       | <u> </u>                     |

▶ NAME OF SOURCE (Not an Acronym)

AFSCME Local 127  
Frank Pizarro, President

ADDRESS (Business Address Acceptable)  
3737 Camino del Rio S Suite 400  
San Diego, CA 92108

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Labor Union

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)    |
|---------------------|-----------------|---------------------------|
| <u>06 / 06 / 13</u> | <u>\$ 93.96</u> | <u>Flower Arrangement</u> |
| <u>  /  /  </u>     | <u>\$</u>       | <u> </u>                  |
| <u>  /  /  </u>     | <u>\$</u>       | <u> </u>                  |

▶ NAME OF SOURCE (Not an Acronym)

United Domestic Workers of America Local 3930

ADDRESS (Business Address Acceptable)  
2760 Fifth Ave Suite 300  
San Diego, CA 92103

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Union

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)                |
|---------------------|------------------|---------------------------------------|
| <u>05 / 24 / 13</u> | <u>\$ 60.00</u>  | <u>Harvey Milk Breakfast</u>          |
| <u>12 / 14 / 13</u> | <u>\$ 100.00</u> | <u>Black Chamber of Commerce Gala</u> |
| <u>10 / 19 / 13</u> | <u>\$ 100.00</u> | <u>NAACP Dinner</u>                   |

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