

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE



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CITY CLERK

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
COLLINS JOHN

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF FOUNTAIN VALLEY

Division, Board, Department, District, if applicable

CITY COUNCIL

Your Position

COUNCIL MEMBER

► 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 -7 AM 8:28

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of Fountain Valley

Other _____

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

Annual: The period covered is January 1, 2013, through December 31, 2013.

Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2013.

The period covered is January 1, 2013, through the date of leaving office.

Assuming Office: Date assumed ____/____/____

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 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 February 28, 2014
(month, day, year)

CALIFORNIA FORM 700

COLLINS, JOHN

ADDENDUM TO FILING MULTIPLE POSITIONS:

Fountain Valley Housing Authority

Member

Successor Agency to the Fountain Valley Agency for Community Development

Member

**SCHEDULE D
Income – Gifts**

Name
COLLINS, JOHN

▶ NAME OF SOURCE *(Not an Acronym)*
FOUNTAIN VALLEY CHAMBER OF COMMERCE

ADDRESS *(Business Address Acceptable)*
10055 SLATER AVENUE, STE 250, FV. CA 92708

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 19 / 2013	\$ 80.00	Mayor's Ball ticket
	\$	
	\$	

▶ 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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	\$	
	\$	

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

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	\$	
	\$	
	\$	

Comments: _____