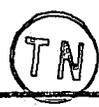


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CITY OF ATASCADERO
CITY CLERK'S OFFICE



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Fonzi Roberta J.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Atascadero City Council Council Member
Division, Board, Department, District, if applicable Your Position

~~6907~~ 6500 Palma, Atascadero, CA 93422

Agency: Local Agency Formation Commission
Position: Successor Agency to the Redevelopment Agency; Oversight Board for Successor Agency to the Redevelopment Agency; Design Review Committee; Air Pollution Control District Board; San Luis Obispo Council of Government (Alternate);

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

- State
- Multi-County _____
- City of Atascadero
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of San Luis Obispo
- 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.
- Assuming Office: Date assumed _____
- Candidate: Election year _____ and office sought, if different than Part 1: _____
- 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.

4. Schedule Summary

- Check applicable schedules or "None." ▶ Total number of pages including this cover page: _____
- 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

I certify under penalty of perjury under the laws of the State of

Date Signed 3/19/14
(month, day, year)

SCHEDULE A-2

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Roberta Fonzi

1. BUSINESS ENTITY OR TRUST Name: Roberta Fonzi (Century 21 HomeTown) Address: 7880 Sinaloa Ave., Atascadero (home office) OR 5255 El Camino Real Ste C, Atascadero (work) Business Description: Real Estate Nature of Investment: Commission YOUR BUSINESS POSITION: Realtor

1. BUSINESS ENTITY OR TRUST (Empty form)

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO-RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499, \$500 - \$1,000, \$1,001 - \$10,000, \$10,001 - \$100,000 (checked), OVER \$100,000

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

3. LIST THE NAME OF EACH REPORTABLE SINGLE-SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None (checked)

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 (checked), 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 (checked), \$10,001 - \$100,000, \$100,001 - \$1,000,000, Over \$1,000,000 NATURE OF INTEREST: Property Ownership/Deed of Trust (checked), Stock, Partnership, Leasehold, Other

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST (Empty form)

Comments:

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name
Roberta Fonzi

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
7880 Sinaloa Ave.
 CITY
Atascadero, CA 93422

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 ACQUIRED / /13 DISPOSED / /13

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Yrs. remaining _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
 None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
7880 Sinaloa Ave #A
 CITY
Atascadero, CA 93422

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 ACQUIRED / /13 DISPOSED / /13

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Yrs. remaining _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
 None

* You are not required to report loans from commercial lending institutions 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 _____
 INTEREST RATE _____ TERM (Months/Years) _____
 _____% None
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER* _____
 ADDRESS (Business Address Acceptable) _____
 BUSINESS ACTIVITY, IF ANY, OF LENDER _____
 INTEREST RATE _____ TERM (Months/Years) _____
 _____% None
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name
Roberta Fonzi

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Century 21 Hometown Realty
 ADDRESS (Business Address Acceptable) Atascadero
5255 El Camino Real Ste C
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate Sales
 YOUR BUSINESS POSITION
REALTOR

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
U.S. Army, Retired
 ADDRESS (Business Address Acceptable) _____
 BUSINESS ACTIVITY, IF ANY, OF SOURCE _____
 YOUR BUSINESS POSITION
Husband's retirement salary

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 _____% None
 TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor _____
 Other _____
(Describe)

Comments: _____

SCHEDULE D
Income - Gifts

▶ NAME OF SOURCE (Not an Acronym)
SLO City Garbage Men's Assoc.
 ADDRESS (Business Address Acceptable)
4388 Old Santa Fe Rd.
San Luis Obispo, CA 93401
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Annual Reception - all waste companies

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12, 13, 13</u>	<u>\$ 118.13</u>	<u>Buffet/Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ 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: _____