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Please type or print in ink.

NAME OF FILER  
Foust (LAST) Rosanne (FIRST)

1. Office, Agency, or Court

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

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

Agency: see attached Position:

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

- State
- Multi-County SF Bay Area
- City of Redwood City
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of
- Other

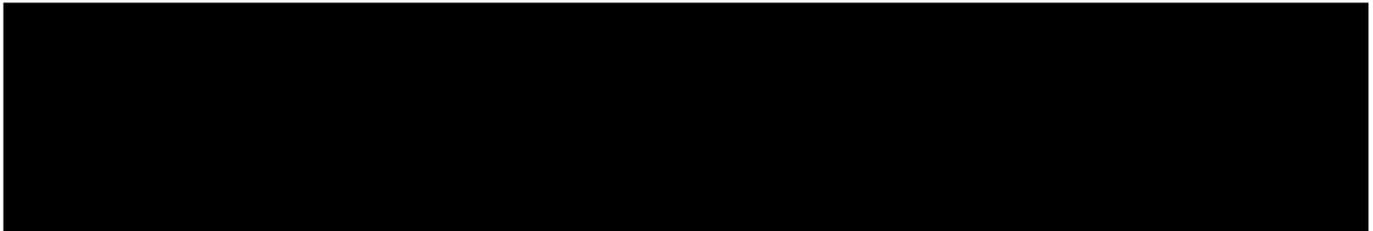
3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2013, through December 31, 2013.
- or-
- The period covered is \_\_\_\_\_, through December 31, 2013.
- Assuming Office: Date assumed \_\_\_\_\_
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
- The period covered is January 1, 2013, through the date of leaving of Office.
- The period covered is \_\_\_\_\_, through the date of leaving of Office.
- Candidate: Election year \_\_\_\_\_ and of Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

- Check applicable schedules or "None." ► Total number of pages including this cover page: 11 pages
- 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 California that the foregoing is true and correct.

Date Signed 3/10/2014  
(month, day, year)

Clear Page Print Form

- Attached - Jurisdiction of office Rosanne Foust
- San Francisco Bay Restoration Authority (9 County Bay Area)  
Board Member
- City/County Association of Governments (San Mateo County)  
Alternate Member
- San Mateo County Transportation Authority (San Mateo County)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name Rosanne Foust

NAME OF BUSINESS ENTITY Wells Fargo  
 GENERAL DESCRIPTION OF THIS BUSINESS Financial Institution  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                    Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13    \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY Paychex  
 GENERAL DESCRIPTION OF THIS BUSINESS Payroll Service  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                    Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/13    10/31/13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY Bank of America  
 GENERAL DESCRIPTION OF THIS BUSINESS Financial Institution  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                    Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13    \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY Baidu  
 GENERAL DESCRIPTION OF THIS BUSINESS Internet  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                    Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/13    10/31/13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY OrleAD  
 GENERAL DESCRIPTION OF THIS BUSINESS Life Sciences  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                    Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13    \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY Coach Inc  
 GENERAL DESCRIPTION OF THIS BUSINESS Leather goods  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
                                    Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13    \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

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



SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name Rosanne Faust

NAME OF BUSINESS ENTITY Capital Income Fund  
 GENERAL DESCRIPTION OF THIS BUSINESS Mutual Fund  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock  Other Mutual Fund  
(Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13 \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY AB Global  
 GENERAL DESCRIPTION OF THIS BUSINESS Mutual Fund  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock  Other Mutual Fund  
(Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13 \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY Franklin Income Fund  
 GENERAL DESCRIPTION OF THIS BUSINESS Mutual Fund  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock  Other Mutual Fund  
(Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13 \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY Allianz Fund  
 GENERAL DESCRIPTION OF THIS BUSINESS Mutual Fund  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock  Other Mutual Fund  
(Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13 \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY Franklin Calif. Tax Fund  
 GENERAL DESCRIPTION OF THIS BUSINESS Mutual Fund  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock  Other Mutual Fund  
(Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13 \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY Allianz FAS  
 GENERAL DESCRIPTION OF THIS BUSINESS Mutual Fund  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000  \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock  Other Mutual Fund  
(Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13 \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED DISPOSED

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

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Print Form

**SCHEDULE A-1**  
**Investments**  
**Stocks, Bonds, and Other Interests**  
 (Ownership Interest is Less Than 10%)  
 Do not attach brokerage or financial statements.

▶ NAME OF BUSINESS ENTITY  
Barstol Meyers  
 GENERAL DESCRIPTION OF THIS BUSINESS  
Healthcare  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE: N/A  
 \_\_\_\_\_/\_\_\_\_\_/13      \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
 \_\_\_\_\_  
 GENERAL DESCRIPTION OF THIS BUSINESS  
 \_\_\_\_\_  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/13      \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Menlo Gate LLC  
 GENERAL DESCRIPTION OF THIS BUSINESS  
Real Estate Investment LLC  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other LLC  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/13      \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
 \_\_\_\_\_  
 GENERAL DESCRIPTION OF THIS BUSINESS  
 \_\_\_\_\_  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/13      \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
SP Depository Receipts Trust  
 GENERAL DESCRIPTION OF THIS BUSINESS  
Index Fund  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other Index Fund  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/13      \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
 \_\_\_\_\_  
 GENERAL DESCRIPTION OF THIS BUSINESS  
 \_\_\_\_\_  
 FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000  
 NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)  
 IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/13      \_\_\_\_\_/\_\_\_\_\_/13  
 ACQUIRED                      DISPOSED

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

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

▶ 1. BUSINESS ENTITY OR TRUST

LAW OFFICES of James H. Hartnett  
 Name  
777 Marshall St. Redwood City CA 94063  
 Address (Business Address Acceptable)

Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS  
LAW OFFICES

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED      /      / 13 DISPOSED      /      / 13

NATURE OF INVESTMENT  
 Partnership  Sole Proprietorship  Other

YOUR BUSINESS POSITION Attorney At Law

▶ 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

Charles J. Smith  
Tyler Hartnett  
(see attached)

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

ACQUIRED      /      / 13 DISPOSED      /      / 13

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 IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED      /      / 13 DISPOSED      /      / 13

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

ACQUIRED      /      / 13 DISPOSED      /      / 13

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 A2

Rosanne Foust  
(spouse)

- David Ariel - Real Estate Investor
- Robert & Pamela Bigler - Software Co. owners
- William Brown / Hartnell Community College District
- Tom Carey - Trustee / McDonald Trust
- James Vance - Pool Service Co.
- John Heley, Diane Johnson + Laura Harms - Real Property
- Virginia Perkins, Perkins Family Trust
- Dennis Arnold, Prudent. Fin. Services
- Charles Shafae, Real property
- 4A Inc. Software Co.
- Western Service Contract Corp - Insurance Services





**SCHEDULE D**  
**Income – Gifts**

Name  
Rosanne Foust

▶ NAME OF SOURCE (Not an Acronym)  
Recology San Mateo County

ADDRESS (Business Address Acceptable)  
Shoreway Rd. San Carlos, CA 94070

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Trash + Recycling

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4, 12, 13</u>	<u>\$75.00</u>	<u>Meal</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)  
Hills Peninsula Auxiliary

ADDRESS (Business Address Acceptable)  
1501 Trousdale Dr. Burlingame CA 94010

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Hospital Foundation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4, 29, 13</u>	<u>\$50.00</u>	<u>luncheon/fundraiser</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)  
Rocket Fuel

ADDRESS (Business Address Acceptable)  
1900 Seaport Blvd. RMC 94063

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Artificial intelligence / software

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6, 30, 13</u>	<u>\$99.00</u>	<u>Big Blue Travel Service for MVR</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)
	\$	
	\$	
	\$	

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