

Paratransit

021300007-NFH-0007

PARATRANSIT, INC.



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) Pannell, Bonnie Jean

1. Office, Agency, or Court

Agency Name (Do not use acronyms) CITY OF SACRAMENTO Division, Board, Department, District, if applicable Mayor and Council Office Your Position City Council Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS Position:

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

State Multi-County City of Sacramento Judge or Court Commissioner (Statewide Jurisdiction) County of Sacramento Other Multi-Jurisdictional

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: 4 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



I certify under penalty of perjury under the laws of the State of California Date Signed 03/20/2014 (month, day, year)

Section 1 Additional Agency(ies)/Position(s) for Pannell, Bonnie Jean:

Agency	Division, Board, Department, District	Position
Regional Human Rights/Fair Housing Commission	Mayor and Council Office	Member
Sac Area Flood Control Agency	Mayor and Council Office	Member
Sac Area Sewer District Board	Mayor and Council Office	Member
Sac Groundwater Authority	Mayor and Council Office	Member
Sac Metropolitan Cable Commission	Mayor and Council Office	Member
Sac Public Library Authority	Mayor and Council Office	Member
Sac Regional County Sanitation District	Mayor and Council Office	Member
Sac Regional Transit	Mayor and Council Office	Member
Sac Transportation Authority	Mayor and Council Office	Member
Freeport Regional Water Agency Board	Mayor and Council Office	Member
Paratransit Board	Mayor and Council Office	Member

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Sac Area Sewer District Board	Mayor and Council Office	Member
Sac Groundwater Authority	Mayor and Council Office	Member
Sac Metropolitan Cable Commission	Mayor and Council Office	Member
Sac Public Library Authority	Mayor and Council Office	Member
Sac Regional County Sanitation District	Mayor and Council Office	Member
Sac Regional Transit	Mayor and Council Office	Member
Sac Transportation Authority	Mayor and Council Office	Member
Freeport Regional Water Agency Board	Mayor and Council Office	Member ✓
Paratransit Board	Mayor and Council Office	Member ✓

SCHEDULE D Income - Gifts

Name
Pannell, Bonnie Jean

▶ NAME OF SOURCE (Not an Acronym)
Sacramento Regional Transit
ADDRESS (Business Address Acceptable)
1400 19th Street
Sacramento, CA 95812
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public Transit Authority

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 25 / 13</u>	<u>\$ 100.00</u>	<u>Dinner Ticket</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Downtown Sacramento Partnership
ADDRESS (Business Address Acceptable)
980 - 9th Street Suite 400
Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Business Improvement District

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 15 / 13</u>	<u>\$ 65.00</u>	<u>Breakfast Meeting</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
A. Teichert & Sons
ADDRESS (Business Address Acceptable)
3500 American River Drive
Sacramento, CA 95864
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Construction Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 15 / 13</u>	<u>\$ 147.00</u>	<u>Dinner</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Kaiser Permanente
ADDRESS (Business Address Acceptable)
6600 Bruceville Road
Sacramento, CA 95823
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public Hospital

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 14 / 13</u>	<u>\$ 131.05</u>	<u>Dinner</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Sacramento Traditional Jazz Society
ADDRESS (Business Address Acceptable)
2787 Del Monte Street
West Sacramento, CA 95691
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Jazz Society

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 25 / 13</u>	<u>\$ 250.00</u>	<u>6 tickets</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
American Promotional Events, Inc.
ADDRESS (Business Address Acceptable)
8151 Power Ridge Road
Sacramento, CA 95826
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fireworks Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 29 / 13</u>	<u>\$ 50.00</u>	<u>Fireworks</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

Comments: _____

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Pannell, Bonnie Jean

SCHEDULE D
Income - Gifts

▶ NAME OF SOURCE (Not an Acronym)
California Exposition & State Fair
 ADDRESS (Business Address Acceptable)
 P.O. Box 15649
 Sacramento, CA 95852
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

State Fair

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 11 / 13	\$ 105.30	Tickets
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Sacramento Convention & Visitors Bureau
 ADDRESS (Business Address Acceptable)
 1608 I Street
 Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Visitors Bureau

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 08 / 13	\$ 50.00	Ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Sacramento Theatre Company
 ADDRESS (Business Address Acceptable)
 1419 H Street
 Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Theatre

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 14 / 13	\$ 140.00	Tickets
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Envision RX Options
 ADDRESS (Business Address Acceptable)
 1100 Investment Road
 El Dorado Hills, CA 95762
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Investment Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 30 / 13	\$ 400.00	Tickets
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: _____

SCHEDULE D
Income - Gifts

▶ NAME OF SOURCE (Not an Acronym)
California Exposition & State Fair
 ADDRESS (Business Address Acceptable)
P.O. Box 15649
Sacramento, CA 95852
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
State Fair

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 11 / 13</u>	<u>\$ 105.30</u>	<u>Tickets</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

▶ NAME OF SOURCE (Not an Acronym)
Sacramento Convention & Visitors Bureau
 ADDRESS (Business Address Acceptable)
1608 I Street
Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Visitors Bureau

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 08 / 13</u>	<u>\$ 50.00</u>	<u>Ticket</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

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 BUSINESS ACTIVITY, IF ANY, OF SOURCE
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<u>10 / 14 / 13</u>	<u>\$ 140.00</u>	<u>Tickets</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

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1100 Investment Road
El Dorado Hills, CA 95762
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 30 / 13</u>	<u>\$ 400.00</u>	<u>Tickets</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

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 ADDRESS (Business Address Acceptable)

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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

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 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

Comments: _____