

AN2013

TN

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

RECEIVED

Date Received
Official Use Only

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

TN

JAN 27 2014
CITY CLERK, City of Fairfield

Please type or print in ink.

NAME OF FILER (LAST) Price (MIDDLE) Harry T.
2014 MAR 10 AM 8:02

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Fairfield

Mayor

Division, Board, Department, District, if applicable

Your Position

► 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 Fairfield
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

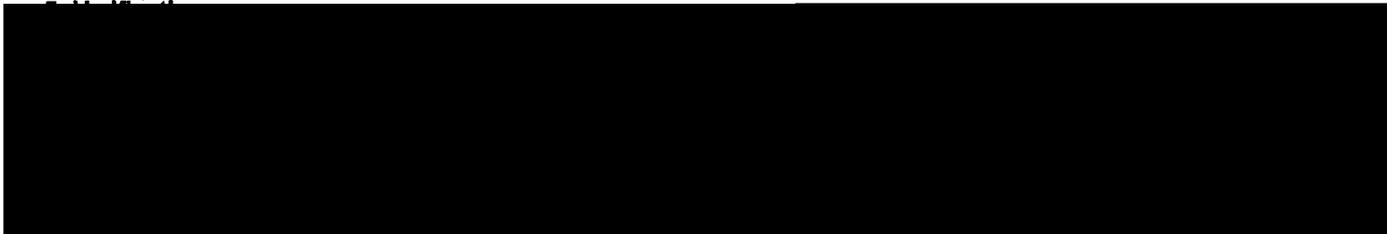
- Annual: The period covered is January 1, 2013, through December 31, 2013.
- or-
- The period covered is _____ through December 31, 2013.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2013, through the date of leaving office.
- 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: 7

- 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



herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 1/21/2014
(month, day, year)

**SCHEDULE A-1
Investments**

Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)
Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR MARKET VALUE OF INVESTMENTS

Name Harry T. Price

▶ NAME OF BUSINESS ENTITY
Fidelity Contra Fund

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
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 _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Oppenheimer Global Fund

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
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 _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name
Harry T. Price

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1931 Larchmont Circle
 CITY
Fairfield

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 1/12 DISPOSED 1/12

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
Joel Escobar

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
2330 Woolner Avenue
 CITY
Fairfield

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 1/12 DISPOSED 1/12

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
Andy Sanchez

* 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*
N/A
 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*
Bank of America N.A.
 ADDRESS (Business Address Acceptable)
P.O. Box 650070 Dallas, TX 75265-00
 BUSINESS ACTIVITY, IF ANY, OF LENDER
Mortgage Company
 INTEREST RATE TERM (Months/Years)
5.25% None 30 years
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
Harry T. Price

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
2332 Woolner Avenue

CITY
Fairfield

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 _____ / ____ / 11 _____ / ____ / 11
 ACQUIRED DISPOSED

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.
Michael Thibodeau

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 _____ / ____ / 11 _____ / ____ / 11
 ACQUIRED DISPOSED

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.

* 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*
Bank of America N.A.

ADDRESS (Business Address Acceptable)
PO Box 650070 Dallas, TX 75265-1070

BUSINESS ACTIVITY, IF ANY, OF LENDER
Mortgage Company

INTEREST RATE TERM (Months/Years)
5.25 % None 30 years

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 E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

Name
Larry T. Price

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)
Herman Rowland

ADDRESS (Business Address Acceptable)
One Jelly Belly Lane

CITY AND STATE
Fairfield, CA 94533

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Candy Maker

DATE(S): 11/15/13 - 11/16/13 AMT: \$ 2918.75
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description Jelly Belly Company
Airplane Flight to attend Reason
National Defense Forum Burbank, CA.

▶ NAME OF SOURCE (Not an Acronym)
See attached Personal Letter

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): _____ AMT: \$ _____
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): _____ AMT: \$ _____
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): _____ AMT: \$ _____
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

Comments: Please see attached letter showing my personal check of
\$ 2918.75 for full reimbursement of flight cost for my travel.

Herman Rowland
One Jelly Belly Lane
Fairfield, CA 94533

December 31, 2013

Harry T. Price
3500 Larchmont Drive
Fairfield, CA 94534

RE: Reagan National Defense Forum Flight Reimbursement required by the
California Fair Political Practices Commission.

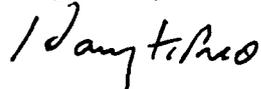
Dear Herm:

Please find enclosed my personal check for \$2918.75 to cover my share of the Jelly # 2779
Belly Company Jet flight to and from the Forum on November 15 and 16, 2013. I
thoroughly enjoyed both flights and our time together. The Forum prepared me
very well for the Travis Community Consortium advocacy trip to Scott Air Force
Base in Illinois December 9 and 10, 2013.

Herm, please know how much your unflagging patriotism and support for the efforts
to keep Travis Air Force viable are to me as the Mayor of Fairfield .

Moreover, I sincerely appreciate your friendship and hope the New Year brings you
greater happiness and the many blessings you earn every day.

Respectfully,



Harry T. Price



Check Image Viewer

HARRY T PRICE
3500 LARCHMONT DRIVE
FAIRFIELD, CA 94534

80-7083/3211

2779

DATE 12/31/15

PAY TO THE ORDER OF

Herman Rodriguez Kelly Kelly Co \$ 2918 ⁷⁵/₁₀₀
Twenty-nine hundred eighteen and 75/100 DOLLARS

70800/010/90
TRAVIS CREDIT UNION

P.O. Box 2069 • Vacaville, CA 95696
800-449-4000 • 800-877-8328

MEMO *Legacy for Mrs. [redacted]*

[Redacted line]

SPECIALTY BLUE

* FEDERAL RESERVE BOARD OF GOVERNORS REG. CC
The security features listed below, as well as those not listed, are used by the industry to guard against counterfeit documents.
Security Features:
MicroPrint Line
Chemically Sensitive Paper
Security Screen
Results of document alterations:
• Small type in line appears as dotted line when photocopied
• Stains or spots may appear with chemical alteration
• Absence of "Original Document" verbiage on back of check

Seq: 7
Dep: 000136

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE
RESERVED FOR FINANCIAL INSTITUTION USE *

Deposited by: Rose
Master
Jelly Belly Candy Co
Jelly Belly Candy Company SBA Her

Member Service Center
(707) 449-4000 or (800) 877-8328
Mon-Fri 8:00am to 7:00pm (PST)
Saturday 9:00am to 5:00pm (PST)
© 2008 Travis Credit Union
All rights reserved.

Mailing Address
Travis Credit Union
P.O. Box 2069
Vacaville, CA 95696

Deposits & Loan Payments Only
Travis Credit Union
P.O. Box 8000
Travis AFB, CA 94535

Report a Lost or Stolen Credit Card
(800) 453-4270
Travis Credit Union ABA
(Routing Number - 321170839)
Disclosures

This credit union is federally insured by the National Credit Union Administration