



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Schaaf, Libby

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Oakland

Division, Board, Department, District, if applicable

Your Position

00411 - District Four Unit

Council Member

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

Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS

Position:

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

- State
- Multi-County _____
- City of Oakland
- 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

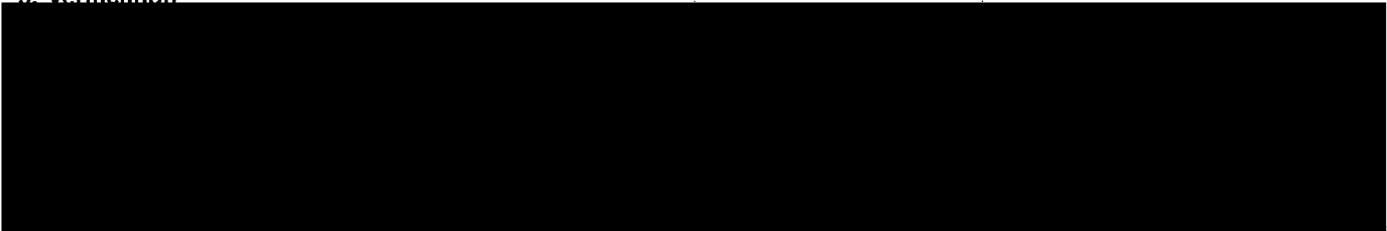
Check applicable schedules or "None."

► Total number of pages including this cover page: 3

- 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 04/01/2014
(month, day, year)

021300008-NFH-0008

Section 1 Additional Agency(ies)/Position(s) for Schaaf, Libby:

Agency	Division, Board, Department, District	Position
Association of Bay Area Governments		Executive Board Member
Chabot Space and Science Center Joint Powers Authority		Board Member

SCHEDULE C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name _____

Schaaf, Libby _____

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME _____

Gatan, Inc. _____

ADDRESS (Business Address Acceptable) _____

794 W. Las Positas Blvd. _____

Pleasanton, CA 94588 _____

BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

electron microscope software _____

YOUR BUSINESS POSITION _____

spouse of software operations director _____

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 _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF SOURCE _____

YOUR BUSINESS POSITION _____

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: _____