



STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Atkins Linda Kathryn

1. Office, Agency, or Court

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

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

Agency: Redwood Coast Energy Association Position: Boardmember

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

- State
- Multi-County _____
- City of Eureka
- 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, 2014, through December 31, 2014.
-or-
The period covered is ____/____/____ through December 31, 2014.
- 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, 2014, 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. [Redacted]

Date Signed 3/17/2015
(month, day, year)

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE *(Not an Acronym)*
Redwood Coast Music Festivals
 ADDRESS *(Business Address Acceptable)*
823 Fifth Street
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Music Festivals

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / / 14</u>	<u>\$ 160.00</u>	<u>Jazz Festival Tickets</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </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)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

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Comments: _____