CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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JAN 13 2015

CG

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CITY OF ALAMEDA
CITY CLERK'S OFFICE

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Oddie	James	Henry

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
City of Alameda

Division, Board, Department, District, if applicable

Your Position
Councilmember

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

Agency: _____ Position: _____

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FAIR POLITICAL PRACTICES COMMISSION
2015 JAN 20 PM 2:20

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

☐ State
☐ Multi-County _____
☑ City of Alameda
☐ 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 12 / 16 / 2014

☐ **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.

☐ **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.

[redacted]

herein and in any attached schedules is true and complete. I ackn

I certify under penalty of perjury under the laws of the State o

Date Signed 01/13/2015
(month, day, year)

SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
James H. Oddie

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Variphy, Inc.

ADDRESS *(Business Address Acceptable)*
16 Biehs Ct., Oakland, CA 94618

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Software sales

YOUR BUSINESS POSITION
Accounting and tax consulting

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 (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or
- ☐ Rental Income, *list each source of $10,000 or more*
- _____ *(Describe)*
- ☑ Other Consulting services *(Describe)*

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Rob Bonta for Assembly

ADDRESS *(Business Address Acceptable)*
1130 College Ave., Alameda, CA 94501

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political campaign

YOUR BUSINESS POSITION
Campaign staff

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 (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or
- ☐ Rental Income, *list each source of $10,000 or more*
- _____ *(Describe)*
- ☐ 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: _____

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Name: James H. Oddie

SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*: Alameda County Industries
ADDRESS *(Business Address Acceptable)*: 611 Aladdin Ave., San Leandro, CA 94577
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Recycling and waste management

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03/01/14	$150.00	Boys & Girls club gala
12/04/14	$25.00	Lunch
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*: Northern California Carpenters Regional Council
ADDRESS *(Business Address Acceptable)*: 265 Hegenberger Ave., Oakland, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Labor union

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/12/14	$50.00	Ticket to Moose Feed
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*: United Contractors
ADDRESS *(Business Address Acceptable)*: 17 Crow Canyon Ct., Ste. 100, San Ramon CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Construction industry trade group

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08/07/14	$90.00	BBQ Ticket
11/08/14	$130.00	Gov't Affairs Dinner
/ /	$	

► 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)
/ /	$	
/ /	$	
/ /	$	

► 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: