



Please type or print in ink.

BY: _____

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Diana Ruslin

1. Office, Agency, or Court

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

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

Agency: See attached Position: _____

RECEIVED FAIR POLITICAL PRACTICES COMMISSION 15 MAR 23 PM 4:03

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

- State, Multi-County, City of Rocklin, Judge or Court Commissioner, County of, Other

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

- Annual: The period covered is January 1, 2014, through December 31, 2014.
Assuming Office: Date assumed
Candidate: Election year and office sought, if different than Part 1:
Leaving Office: Date Left
The period covered is January 1, 2014, through the date of leaving office.

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
None - No reportable interests on any schedule

Signature 3/9/15 (File the originally signed statement with your filing official.)

SCHEDULE D
Income – Gifts

Name
Diana Ruslin

▶ NAME OF SOURCE (Not an Acronym)
 Studio Movie Grill

ADDRESS (Business Address Acceptable)
 5140 Commons Drive Rocklin, CA 95677

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Business Grand Opening

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 13 / 14	\$ 75.00	Tickets / 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

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

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Comments: _____

Attachment to Cover Page

FPPC Form 700

Annual Statement

2014

1. Office, Agency, or Court

Continued (multiple positions)

- **Placer County Air Pollution Control District
(Board Member)**

- **Placer County Flood Control and Drainage District
(Alternate Board Member)**

- **Placer County Transportation Planning Agency
(Board Member)**

- **Sacramento Area Council of Government
Multi-County: El Dorado, Placer, Sacramento, Sutter, Yolo, and
Yuba
(Alternate Board Member)**

- **Regional Transportation Authority
Lincoln, Rocklin, Roseville and the County of Placer
(Board Member)**

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