

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Theodores Thomas

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Sausalito
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: _____

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

- State
- Multi-County _____
- City of Sausalito
- 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: 2

- 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

Date Signed 03/27/2015 11:44 AM
(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 POLITICAL PRACTICES COMMISSION

Name

Thomas Theodores

▶ NAME OF BUSINESS ENTITY
Oracle Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
Software

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:
 / / 14 / / 14
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Wells Fargo Bank

GENERAL DESCRIPTION OF THIS BUSINESS
Banking

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)
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IF APPLICABLE, LIST DATE:
 / / 14 / / 14
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
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Comments: _____