CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

# STATEMENT OF ECONOMIC INTERESTS

CG

## COVER PAGE

RECEIVED
Date Initial Filing Received
MAR 2 4
Official Use Only
By

*Please type or print in ink.*

| NAME OF FILER (LAST) | (FIRST) | (MIDDLE) |
|---|---|---|
| Walker | Richard | Lee |

## 1. Office, Agency, or Court

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

Division, Board, Department, District, if applicable: City Council

Your Position: Council Member

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

Agency: _____ Position: _____

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
2015 APR -2 PM 2:27

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

- ☐ State
- ☐ Multi-County _____
- ☑ City of Chowchilla
- ☐ 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 ____/____/_____

☐ **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. Verification

[redacted]

I certify under penalty of perjury under the laws of the State of [redacted]

Date Signed 03/23/2015
*(month, day, year)*

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

**CALIFORNIA FORM 700**
FAIR POLITICAL PRACTICES COMMISSION

Name: Richard Walker

### 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME: The Full Gospel Truth Church Inc.

ADDRESS *(Business Address Acceptable)*: 1020 Robertson Blvd, Chowchilla, Ca 93610

BUSINESS ACTIVITY, IF ANY, OF SOURCE: Religious Organization/Church

YOUR BUSINESS POSITION: Pastor/National Superintendent

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)*

### 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME: City of Chowchilla

ADDRESS *(Business Address Acceptable)*: 130 S. 2nd St. Chowchilla. Ca 93610

BUSINESS ACTIVITY, IF ANY, OF SOURCE: Local Government

YOUR BUSINESS POSITION: Council Member

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:** _____

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Richard Walker

# SCHEDULE D
## Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
League of California Cities
ADDRESS *(Business Address Acceptable)*
1400 K St, Suite 400, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Policy Committee

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 01/24/14 | $ 25.00 | Lunch |
| 04/04/14 | $ 25.00 | Lunch |
| / / | $ | |

► 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) |
|---|---|---|
| / / | $ | |
| / / | $ | |
| / / | $ | |

► 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:**