



STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing  
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FAIR POLITICAL PRACTICES COMMISSION  
COVER PAGE

CITY OF AGOURA HILLS

Please type or print in ink.

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(LAST) WEBER DENIS (FIRST)

2015 MAR 23 AM 10:36  
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WEBER

DENIS

CITY CLERK

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF AGOURA HILLS

Division, Board, Department, District, if applicable

CITY COUNCIL

Your Position

MEMBER OF COUNCIL

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

Agency: SEE EXPANDED STATEMENT

Position:

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County

County of

City of AGOURA HILLS

Other

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

Annual: The period covered is January 1, 2014, through December 31, 2014.

Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2014.

The period covered is January 1, 2014, through the date of leaving office.

Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

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 C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

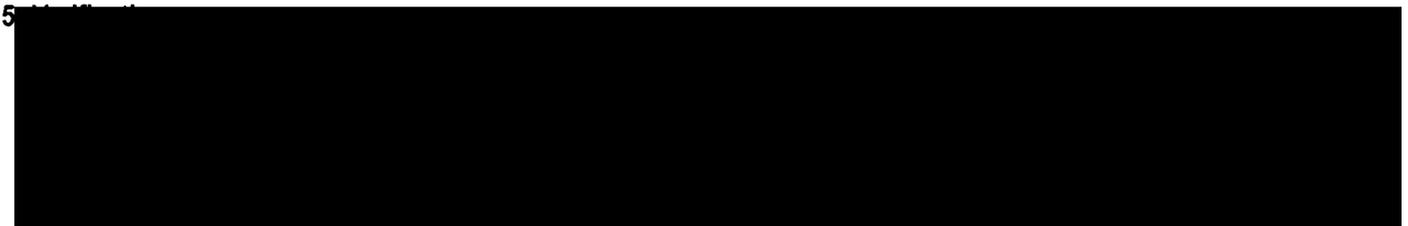
Schedule D - Income - Gifts - schedule attached

Schedule B - Real Property - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule



herein and in any attached schedules is true and complete. I acknowledge  
I certify under penalty of perjury under the laws of the State of

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  
 DENIS J. WEBER

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
 DRS. DANDONA, CURRY & OH

ADDRESS (Business Address Acceptable)  
 28040 DOROTHY DR., AGOURA HILLS, CA 91301

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 DENTAL

YOUR BUSINESS POSITION  
 BOOKKEEPER

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

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

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      TERM (Months/Years)

\_\_\_\_\_ %       None      \_\_\_\_\_

SECURITY FOR LOAN  
 None       Personal residence

Real Property \_\_\_\_\_  
 \_\_\_\_\_  
 Street address  
 \_\_\_\_\_  
 City

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
 (Describe)

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
**DENIS J. WEBER**

▶ NAME OF SOURCE *(Not an Acronym)*  
 Richards, Watson & Gershon  
 ADDRESS *(Business Address Acceptable)*  
 355 S. Grand Avenue, 40th Floor, LA CA 90071  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 09 / 14	\$ 27.69	Lunch
12 / 06 / 14	\$ 43.84	Holiday Gift
___ / ___ / ___	\$ _____	_____

▶ 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)*  
 T.H.E. Foundation (Las Virgenes Unified School Dist)  
 ADDRESS *(Business Address Acceptable)*  
 4111 N. Las Virgenes Road, Calabasas, CA 91302  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 The Event (fundraiser)

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 07 / 14	\$ 175.00	Fundraiser
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)*  
 Chabad of the Conejo  
 ADDRESS *(Business Address Acceptable)*  
 30345 Canwood St., Agoura Hills, CA 91301  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Fundraiser

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 09 / 14	\$ 300.00	Fundraiser
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: \_\_\_\_\_

DENIS J. WEBER  
STATEMENT OF ECONOMIC INTERESTS – FORM 700

**2014 EXPANDED STATEMENT:**

AGENCY: AGOURA HILLS FINANCING AUTHORITY  
POSITION: DIRECTOR

AGENCY: AGOURA HILLS IMPROVEMENT AUTHORITY  
POSITION: AUTHORITY COMMISSIONER

AGENCY: PARKING AUTHORITY OF THE CITY OF AGOURA HILLS  
POSITION: BOARD MEMBER

AGENCY: SUCCESSOR AGENCY TO THE AGOURA HILLS REDEVELOPMENT AGENCY  
POSITION: DIRECTOR

AGENCY: LAS VIRGENES/MALIBU COG  
POSITION: DELEGATE