Berkeley

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

FAIR POLITICAL PRACTICES COMMISSION
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Please type or print in ink.

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

Bates, Tom

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Berkeley

Division, Board, Department, District, if applicable: Mayor and Council

Your Position: Mayor

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

Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS

Position:

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

- [X] State
- [ ] Multi-County
- [X] City of Berkeley
- [ ] Judge or Court Commissioner (Statewide Jurisdiction)
- [X] County of Alameda
- [ ] Other

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

[X] **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:** 5

- [ ] **Schedule A-1** - *Investments* – schedule attached
- [ ] **Schedule A-2** - *Investments* – schedule attached
- [ ] **Schedule B** - *Real Property* – schedule attached
- [X] **Schedule C** - *Income, Loans, & Business Positions* – schedule attached
- [X] **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 ackno[redacted]

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

Date Signed March 20, 2015
(month, day, year)

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
Expanded Statement Attachment

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Tom Bates

Agency	Division/Board/Dept/District	Position	Type of Statement
City of Berkeley	Mayor and Council Department	Mayor	Annual 1/1/2014 - 12/31/2014
Successor Agency to the Redevelopment Agency	Berkeley	President	Annual 1/1/2014 - 12/31/2014
Joint Powers Finance Authority	Berkeley	Director	Annual 1/1/2014 - 12/31/2014
Bay Conservation and Development Comission	Comission	Comissioner	Annual 1/1/2014 - 12/31/2014
Metropolitan Transportation	Commission	Comissioner	Annual 1/1/2014 - 12/31/2014
Bay Area Air Quality Management District	District	Director	Annual 1/1/2014 - 12/31/2014
City of Berkeley	Mayor and Council	Mayor	Annual 1/1/2014 - 12/31/2014

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Bates, Tom

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Ilona H Hancock
ADDRESS *(Business Address Acceptable)*
2225 Ward St.
Berkeley , CA 94705
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legislator
YOUR BUSINESS POSITION
Spouse

GROSS INCOME RECEIVED
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [x] OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- [ ] Salary
- [x] 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
_____ % [ ] None

TERM (Months/Years)

SECURITY FOR LOAN
- [ ] None
- [ ] Personal residence
- [ ] Real Property _____ *Street address*
_____ *City*
- [ ] Guarantor _____
- [ ] Other _____ *(Describe)*

Comments:

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Name: Bates, Tom

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE (Not an Acronym): Oakland-Alameda County Coliseum Authority
ADDRESS (Business Address Acceptable): 7000 Coliseum Way, Oakland, CA 94621
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01/10/14	$ 250.00	Basketball Ticket
/ /	$	
/ /	$	

▶ NAME OF SOURCE (Not an Acronym): Cisco Devries
ADDRESS (Business Address Acceptable): 4413 Montgomery Street, Oakland, CA 94611
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10/24/14	$ 150.00	Football Ticket
/ /	$	
/ /	$	

▶ NAME OF SOURCE (Not an Acronym): University of California
ADDRESS (Business Address Acceptable): 200 California Hall MC #1500, Berkeley, CA 94720
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07/26/14	$ 175.00	Soccer Tickets
10/18/14	$ 100.00	Football Ticket
/ /	$	

▶ NAME OF SOURCE (Not an Acronym): ICEX Spain Trade and Investment
ADDRESS (Business Address Acceptable): Passeo de la Castellana 14-2 Fl, Madrid, ES 28046
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09/22/14	$ 409.00	Cultural Activities (9/16-9/22)
09/21/14	$ 409.00	Transportation (9/16-9/22)
09/20/14	$ 409.00	Meals (9/16-9/22)

▶ 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:

Additional Schedule D Gifts from ICEX Spain Trade and Investment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09/19/2014	$409.00	same (9/16-9/22)
09/18/2014	$409.00	same (9/16-9/22)
09/17/2014	$409.00	same (9/16-9/22)
09/16/2014	$409.00	same (9/16-9/22)