



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Bernald Mary-Lynne

1. Office, Agency, or Court

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

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

Agency: SEE ATTACHED LIST Position:

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

- State  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County  County of
- City of Saratoga  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 12 / 02 / 2014, 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: 2

- 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

Date Signed 03/09/2015 03:58 PM  
(month, day, year)

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
EXPANDED STATEMENT LIST

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
Mary-Lynne Bernald

Agency	Position or Title	Jurisdiction	Type of Statement	Period Covered
City of Saratoga	Planning Commissioner	City of Saratoga	Annual	01/01/14 - 12/02/14