

COVER PAGE

CG

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Berry Donald B

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Town of Fort Jones

Division, Board, Department, District, if applicable

Your Position

City Council Member

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PRACTICES COMMISSION
2015 FEB 17 PM 3:34

► 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 Fort Jones

- 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.

Leaving Office: Date Left ____/____/____ (Check one)

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: 1

- 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. [Redacted]

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 02/09/2015
(month, day, year)