

RECEIVED COVER PAGE PRACTICES COMMISSION

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1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of San Mateo

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:

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

- State, Multi-County, City of San Mateo, Judge or Court Commissioner, County of, Other

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

- Annual, Leaving Office, Assuming Office, Candidate

4. Schedule Summary

Check applicable schedules or "None."

Total number of pages including this cover page: 1

- Schedule A-1, A-2, B, C, D, E

None - No reportable interests on any schedule

Date Signed

6-17-15

(month, day, year)