

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Initial Filing

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CG

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Isleton

Division, Board, Department, District, if applicable

Your Position

Councilmember

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

Agency: City of Isleton

Position: Treasurer

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County

County of

City of Isleton

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 ac

I certify under penalty of perjury under the laws of the State

Date Signed 01/20/2015

(month, day, year)

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2/25/14

SCHEDULE A-2

Investments, Income, and Assets  
of Business Entities/Trusts  
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Pamela Bulhan

1. BUSINESS ENTITY OR TRUST

Pamela Multimedia

Name

616 Union Street, Isleton, CA 95641

Address (Business Address Acceptable)

Check one

- Trust, go to 2  Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

custom printing based in home office

FAIR MARKET VALUE

- \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
ACQUIRED      DISPOSED

NATURE OF INVESTMENT

- Partnership  Sole Proprietorship  Other

YOUR BUSINESS POSITION owner

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- \$0 - \$499  \$10,001 - \$100,000  
 \$500 - \$1,000  OVER \$100,000  
 \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

- None or  Names listed below

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

- INVESTMENT  REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE

- \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
ACQUIRED      DISPOSED

NATURE OF INTEREST

- Property Ownership/Deed of Trust  Stock  Partnership

Leasehold \_\_\_\_\_ Yrs. remaining  Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

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

1. BUSINESS ENTITY OR TRUST

Turtle Island Art Treasures

Name

37 Main Street, Isleton, CA 95641

Address (Business Address Acceptable)

Check one

- Trust, go to 2  Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

retail sales in monthly rented space

FAIR MARKET VALUE

- \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
ACQUIRED      DISPOSED

NATURE OF INVESTMENT

- Partnership  Sole Proprietorship  Other

YOUR BUSINESS POSITION owner

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IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
ACQUIRED      DISPOSED

NATURE OF INTEREST

- Property Ownership/Deed of Trust  Stock  Partnership

Leasehold \_\_\_\_\_ Yrs. remaining  Other \_\_\_\_\_

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RECEIVED  
1-2-15-14

**SCHEDULE D**  
**Income – Gifts**

Name  
**Pamela Bulahan**

▶ **NAME OF SOURCE (Not an Acronym)**  
**Local Government Commission**

ADDRESS (Business Address Acceptable)  
**980 9th Street, Suite 1700, Sacramento CA 95814**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**First Thursday Dinner Forum**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 01 / 14	\$ 40.00	meal
	\$	
	\$	

▶ **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)
	\$	
	\$	
	\$	

▶ **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)
	\$	
	\$	
	\$	

▶ **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: The First Thursday Forum was held at Iron Steaks Restaurant, 2422 13th Street in Sacramento.