

STATEMENT OF ECONOMIC INTERESTS

Received
Date Initial Filing
MAR 30 2015
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COVER PAGE
FAIR POLITICAL PRACTICES COMMISSION

Town of San Anselmo

Please type or print in ink.

NAME OF FILER (LAST) Greene (FIRST) Ford (MIDDLE)
2015 APR -3 PM 1:24

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

San Anselmo Town Council

Division, Board, Department, District, if applicable

Your Position

Town Councilman

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

Agency: see attachment

Position: _____

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of San Anselmo

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: 4

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 03/30/2015

(month, day, year)

**SCHEDULE D
Income – Gifts**

Name
Ford Greene

▶ NAME OF SOURCE (Not an Acronym)
Marin Sanitary Service

ADDRESS (Business Address Acceptable)
1050 Anderson Drive, San Rafael, CA 94901

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 25 / 14	\$ 27.00	Holiday basket
12 / 18 / 14	\$ 75.00	Firewood
	\$	

▶ 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: _____

Attachment to Form 700 Cover Page

Town of San Anselmo

Marin Energy Authority

Marin Telecommunications JPA

Transportation Authority of Marin

~~San Francisco Police Department~~

Ross Valley Fire District