

RECEIVED

MAR 24 2015
(MIDDLE)

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
KASPERZAK, JR. R. MICHAEL

CITY CLERK

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF MOUNTAIN VIEW

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: _____

Position: _____

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
2015 MAR 30 PM 4:40

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

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of MOUNTAIN VIEW 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.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2014, through the date of leaving office.
- 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: 5
- 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]

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

Date Signed March 15, 2015
(month, day, year)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.



<BLUE> is a required field

NAME OF BUSINESS ENTITY	GENERAL DESCRIPTION OF THIS BUSINESS ACTIVITY	FAIR MARKET VALUE (Select from drop down list)	NATURE OF INVESTMENT (Select from drop down list. If "other" describe)	IF APPLICABLE, LIST DATE (mm/dd/yyyy)	
				ACQUIRED	DISPOSED
NORTHERN TRUST 6.5% 8/15/18	FINANCIAL SERVICES	\$2000 - \$10,000	BOND		
PFIZER	PHARMACEUTICALS	\$2000 - \$10,000	STOCK		
VERIZON	TELECOMMUNICATIONS	\$2000 - \$10,000	STOCK		
ABBOTT LABS	PHARMACEUTICALS	\$10,001 - \$100,000	STOCK		5/5/14
ABBVIE INC	PHARMACEUTICALS	\$10,001 - \$100,000	STOCK		
ADT 2.25% 7/15/2017	TELECOMMUNICATIONS	\$10,001 - \$100,000	BOND		
ANADARKO PETROLEUM 7.05% 5/15/18	OIL & GAS	\$10,001 - \$100,000	BOND		
APPLE COMPUTER	COMPUTER	\$10,001 - \$100,000	STOCK		
ARCELORMITTAL 9%15 NOTES DUE 2/15/18	OIL & GAS	\$10,001 - \$100,000	BOND		10/30/14
AUTONATION 6.75% 4/15/18	AUTOMOTIVE	\$10,001 - \$100,000	BOND		
BAXTER INTERNATIONAL	INDUSTRIAL	\$10,001 - \$100,000	STOCK	9/23/14	
BECTON DICKINSON & CO	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
BERKSHIRE-HATHAWAY	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
BLACKBAUD	SOFTWARE	\$10,001 - \$100,000	STOCK		9/9/14
C H ROBINSON WORLDWIDE NEWS	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
COACH	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		5/23/14
COCA COLA CO.	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		
COGNIZANT TECHNOLOGY	COMPUTER	\$10,001 - \$100,000	STOCK		
COLGATE PALMOLIVE	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		
CONTRA COSTA CN 3.75%21REV DUE 06/15/18	MUNICIPAL	\$10,001 - \$100,000	BOND		
DANA HLDG CORP 6.5% 2/15/19	INDUSTRIAL	\$10,001 - \$100,000	BOND		
DISNEY, WALT	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		
ECOLAB	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
ENTERPRISE PRODUCT PARTNERS	OIL & GAS	\$10,001 - \$100,000	STOCK		
EXXON MOBIL	OIL & GAS	\$10,001 - \$100,000	STOCK		
GENERAL DYNAMICS	INDUSTRIAL	\$10,001 - \$100,000	STOCK		10/1/14
GENERAL ELECTRIC	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
IBM	COMPUTER	\$10,001 - \$100,000	STOCK		
JP MORGAN	FINANCIAL SERVICES	\$10,001 - \$100,000	STOCK		
KINDER MORGAN	INDUSTRIAL	\$10,001 - \$100,000	STOCK		12/2/14
KLA TENCOR 6.9% DUE 5/1/18	COMPUTER	\$10,001 - \$100,000	BOND		12/19/14
MAGELLAN MIDSTREAM PARTNERS	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
MCDONALDS	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		
MEDTRONIC	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		
MICROSOFT	COMPUTER	\$10,001 - \$100,000	STOCK		
MMM	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
NIKE	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		
NOVO-NORDISK	PHARMACEUTICALS	\$10,001 - \$100,000	STOCK		
OMNICOM GROUP	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
ORACLE	SOFTWARE	\$10,001 - \$100,000	STOCK		
OWENS & MINOR 6.35% DUE 4/15/16	INDUSTRIAL	\$10,001 - \$100,000	BOND		10/16/14
PEPSICO	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		
PETROHAWK ENERGY 7.785% 15 NOTES DUE 12/15/16	OIL & GAS	\$10,001 - \$100,000	BOND		2/3/14
PLAINS ALL AMERICAN PIPELINE	OIL & GAS	\$10,001 - \$100,000	STOCK		
PROCTER & GAMBLE	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		
PUBLIC STORAGE 5.9% PFD	CONSUMER GOODS	\$10,001 - \$100,000	BOND		
ROBERT HALF INC.	EMPLOYMENT	\$10,001 - \$100,000	STOCK		
SOUTHWEST AIR 5.75% 12/15/16	TRAVEL	\$10,001 - \$100,000	BOND		
STEELCASE 6.375% 2/15/21	INDUSTRIAL	\$10,001 - \$100,000	BOND		
STRYKER	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
TARGET-DAYTON HUDSON	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		
UNION PACIFIC RES GROUP 7.05% 5/15/18	TRANSPORTATION	\$10,001 - \$100,000	BOND		5/29/14
UNITED TECHNOLOGIES	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
VARIAN MEDICAL SYSTEMS	INDUSTRIAL	\$10,001 - \$100,000	STOCK		
WAL-MART	CONSUMER GOODS	\$10,001 - \$100,000	STOCK		

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
 R. MICHAEL KASPERZAK JR

▶ 1. BUSINESS ENTITY OR TRUST
DISPUTE RESOLUTION SPECIALISTS
 Name
 1172 MORTON COURT, MOUNTAIN VIEW, CA
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
MEDIATION SERVICE PROVIDER

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 14 DISPOSED / / 14

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 IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 14 DISPOSED / / 14

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

▶ 1. BUSINESS ENTITY OR TRUST
 Name
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 14 DISPOSED / / 14

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION

▶ 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 IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 14 DISPOSED / / 14

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:

**SCHEDULE D
Income – Gifts**

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name R. MICHAEL KASPERZA

▶ NAME OF SOURCE (Not an Acronym)
STANFORD UNIVERSITY

ADDRESS (Business Address Acceptable)
STANFORD, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
HIGHER EDUCATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 06 / 14	\$ 20.00	AWARDS LUNCH
10 / 10 / 14	\$ 132.00	FOOTBALL TICKETS
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
SAN FRANCISCO PUC

ADDRESS (Business Address Acceptable)
525 GOLDEN GATE AVE, SAN FRANCISCO, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
WATER SUPPLIER

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 25 / 14	\$ 216.59	SITE TOUR
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name R. MICHAEL KASPERZAK JR

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)
LEAGUE OF CALIFORNIA CITIES

ADDRESS (Business Address Acceptable)
1400 K STREET

CITY AND STATE
SACRAMENTO, CA

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
ADVOCACY FOR CITIES AND THEIR RESIDENTS

DATE(S): 01 / 01 / 14 - 12 / 31 / 14 AMT: \$ 3,732.52
(If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

T&M FOR VOLUNTEER SERVICE AS BOARD AND COMMITTEE MEMBER

▶ NAME OF SOURCE (Not an Acronym)
INSTITUTE FOR LOCAL GOVERNMENT

ADDRESS (Business Address Acceptable)
1400 K STREET

CITY AND STATE
SACRAMENTO, CA

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
LOCAL GOVERNMENT RESEARCH & EDUCATION

DATE(S): 01 / 01 / 14 - 12 / 31 / 14 AMT: \$ 538.48
(If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

T&M FOR VOLUNTEER SERVICE AS BOARD AND COMMITTEE MEMBER

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____
(If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____
(If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

Comments: _____