CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Harper	Wade	

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
City of Antioch

Division, Board, Department, District, if applicable: City Council

Your Position: Mayor

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

Agency: (See Attached)

Position:

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

- ☐ State
- ☐ Multi-County
- ☑ City of Antioch
- ☐ 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.

☐ **Assuming Office:** Date assumed ___/___/___

☐ **Candidate:** Election year ___ and office sought, if different than Part 1:

☐ **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.

4. Schedule Summary

Check applicable schedules or "None."

► ***Total number of pages including this cover page:*** 3

- ☐ **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 ackn[redacted]

I certify under penalty of perjury under the laws of the State of [redacted]

Date Signed 03/15/2015
(month, day, year)

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Wade Harper

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE *(Not an Acronym)*
Pacific Gas & Electric
ADDRESS *(Business Address Acceptable)*
1330 Broadway Ste. 2605 Oakland 94612
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Utility

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 21 / 14	$ 95.00	Sports Ticket
05 / 16 / 14	$ 50.00	Conference Ticket
/ /	$	

▶ NAME OF SOURCE *(Not an Acronym)*
The Coca Cola Company
ADDRESS *(Business Address Acceptable)*
2603 Camino Ramon, Ste 550 San Ramon, CA 94583
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Beverage Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 08 / 14	$ 100.00	Banquet ticket
/ /	$	
/ /	$	

▶ 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:

COMMITTEE ASSIGNMENTS
January 2014 to December 2014

COMMITTEE	POSITION
Successor Agency to the Antioch Development Agency	Boardmember
Association Of Bay Area Governments	Delegate
Delta Diablo Sanitation District (Delta Diablo)	Boardmember
Tri Delta Transit / Easter Contra Costa Transit Authority	Boardmember
East Contra Costa Regional Fee and Financing Authority	Boardmember
State Route 4 By-Pass Authority	Boardmember
TRANSPLAN	Boardmember
Contra Costa Transportation Authority	Alternate Boardmember
Antioch Public financing Authority	Boardmember