CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

CG

COVER PAGE

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NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Slowey	Jeffrey (Jeff)	A.

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
Citrus Heights City Council

Division, Board, Department, District, if applicable

Your Position
Council Member

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

Agency: Successor Agency for the Comm. Redevelopment Position: Agency (Board Member)

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

- ☐ State
- ☐ Multi-County _____
- ☑ City of Citrus Heights
- ☐ 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. Verification

[redacted]

herein and in any attached schedules is true and complete. I acknowledge

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

Date Signed 2-20-15
(month, day, year)

SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Slowey, Jeff

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Bank of America

ADDRESS *(Business Address Acceptable)*
10850 White Rock Rd., Rancho Cordova, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Banking

YOUR BUSINESS POSITION
Vice President

GROSS INCOME RECEIVED
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☑ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- ☑ Salary
- ☐ Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*
  _____ *(Describe)*
- ☐ Other _____ *(Describe)*

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Wal-Mart

ADDRESS *(Business Address Acceptable)*
7000 Auburn Blvd., Citrus Heights, CA 95621

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Retail

YOUR BUSINESS POSITION
Assistant Manager

GROSS INCOME RECEIVED
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☑ $10,001 - $100,000
- ☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- ☐ Salary
- ☐ Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*
  _____ *(Describe)*
- ☐ Other _____ *(Describe)*

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*
_____

ADDRESS *(Business Address Acceptable)*
_____

BUSINESS ACTIVITY, IF ANY, OF LENDER
_____

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

INTEREST RATE
_____% ☐ None

TERM (Months/Years)
_____

SECURITY FOR LOAN
- ☐ None
- ☐ Personal residence
- ☐ Real Property _____ *Street address*
  _____ *City*
- ☐ Guarantor _____
- ☐ Other _____ *(Describe)*

Comments: _____

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name: Slowey, Jeff

SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*: Local Government Commission
ADDRESS *(Business Address Acceptable)*: 1303 J St. # 250, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Local Elected Leaders Resource Center

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03/06/14	$ 40.00	Dinner
09/18/14	$ 40.00	Dinner
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*: League of California Cities
ADDRESS *(Business Address Acceptable)*: 1400 K St. Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Advocacy for California Cities

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01/24/14	$ 29.81	Policy Lunch
04/04/14	$ 33.98	Policy Lunch
06/20/14	$ 30.36	Policy Lunch

► NAME OF SOURCE *(Not an Acronym)*: Region Builders PAC
ADDRESS *(Business Address Acceptable)*: 1331 T St., Sacramento, CA 95811
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Building/Development PAC

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08/18/14	$ 95.00	BBQ Dinner (me)
08/18/14	$ 95.00	BBQ Dinner (spouse)
/ /	$	

► 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: