CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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CITY OF ARCATA
CITY MANAGER'S OFFICE

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Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Winkler	Michael	Louis

1. Office, Agency, or Court

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

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

Your Position: Council Member

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

Agency: see attached

Position: City Representative

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

- ☐ State
- ☐ Multi-County _____
- ☑ City of Arcata
- ☐ 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 ____/____/_____

☐ **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:*** 2

- ☐ **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 o[redacted]

Date Signed 2/20/2015
(month, day, year)

Attachment to 2014/2015 Statement of Economic Interests, Form 700
Winkler, Michael L.

Cover Page

1. **Office, Agency or Court**
   a. Agency Name: Successor Agency to the Community Development Agency of the City of Arcata
      Division: Board of Directors
      Your Position: Board Member

   b. Agency Name: Humboldt County Association of Governments
      Division: Board of Directors
      Your Position: Alternate Board Member

   c. Agency Name: Humboldt Transit Authority
      Division: Board of Directors
      Your Position: Board Member

   d. Agency Name: Humboldt Waste Management Authority
      Division: Board of Directors
      Your Position: Alternate Board Member

2. **Jurisdiction of Office**
   a. City of Arcata
   b. County of Humboldt
   c. County of Humboldt
   d. County of Humboldt