

## STATEMENT OF ECONOMIC INTERESTS

Date Received  
Official Use Only

## COVER PAGE

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Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Bolotina, Olga			

## 1. Office, Agency, or Court

Agency Name

CITY OF OAKLAND

Division, Board, Department, District, if applicable

00111 - District One Unit

Your Position

CityCouncilPSE51 CommunityOutreachDirect

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

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

☐ State☐ Judge or Court Commissioner (Statewide Jurisdiction)☐ Multi-County \_\_\_\_\_☒ County of CA☒ City of Oakland☐ Other \_\_\_\_\_

## 3. Type of Statement (Check at least one box)

☐ Annual: The period covered is January 1, 2012, through December 31, 2012

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2012.

☒ Assuming Office: Date assumed 01/07/13☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)☐ The period covered is January 1, 2012, 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 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

## 5. Verification

MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
1 Frank H. Ogawa Plaza 2nd floor, Sui Oakland CA 94612				
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS (OPTIONAL)		
( 510 ) 238-7240		obolotina@oaklandnet.com		

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 02/06/2013  
(month, day, year)Signature \_\_\_\_\_  
(File the originally signed statement with your filing official.)

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

**CALIFORNIA FORM 700**

**FAIR POLITICAL PRACTICES COMMISSION**

Name

Bolotina, Olga

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

TransFormCA

ADDRESS (Business Address Acceptable)

436 14th Street Suite 600  
Oakland CA 94612

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Transportation advocacy

YOUR BUSINESS POSITION

Event Coordinator

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

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Dan Kalb for Oakland City Council

ADDRESS (Business Address Acceptable)

1814 Franklin St. Suite 510  
Oakland CA 94612

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Campaign Services

YOUR BUSINESS POSITION

Campaign 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

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ 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: \_\_\_\_\_