

STATEMENT OF ECONOMIC INTERESTS

 Date Received
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COVER PAGE

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| NAME OF FILER | (LAST) | (FIRST) | (MIDDLE) |
|-----------------|--------|---------|----------|
| Lowe, Andrea H. | | | |

1. Office, Agency, or Court

Agency Name

City of Oakland

Division, Board, Department, District, if applicable

Your Position

Workforce Investment Board

Member

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

Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS

Position: _____

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

☐ State☐ Judge or Court Commissioner (Statewide Jurisdiction)☐ Multi-County _____☐ County of _____☒ 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.

☐ **Leaving Office:** Date Left ____/____/____ (Check one)☐ The period covered is January 1, 2012, through the date of leaving office.☐ **Assuming Office:** Date assumed ____/____/____☐ 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: 6☒ **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 |
|--------------------------|--------|---------------------------|-------|----------|
| 1970 Broadway Suite 1100 | | Oakland | CA | 94612 |
| DAYTIME TELEPHONE NUMBER | | E MAIL ADDRESS (OPTIONAL) | | |
| (510) 986-1100 | | alowe@a2ventures.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 04/02/2013
 (month, day, year)

 Signature _____
 (File the originally signed statement with your filing official.)

| Agency | Division, Board, Department, District | Position |
|---------------------|---------------------------------------|----------|
| Office of the Mayor | Workforce Investment Board | Member |

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Lowe, Andrea H.

▶ NAME OF BUSINESS ENTITY

A Squared Ventures

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Community Affairs Consulting

FAIR MARKET VALUE

☐ \$2,000 \$10,000 ☐ \$10,001 \$100,000
☐ \$100,001 \$1,000,000 ☒ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____
(Describe)☒ Partnership ☐ Income Received of \$0 \$499
☒ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

☐ \$2,000 \$10,000 ☐ \$10,001 \$100,000
☐ \$100,001 \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____
(Describe)☐ Partnership ☐ Income Received of \$0 \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

☐ \$2,000 \$10,000 ☐ \$10,001 \$100,000
☐ \$100,001 \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____
(Describe)☐ Partnership ☐ Income Received of \$0 \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

☐ \$2,000 \$10,000 ☐ \$10,001 \$100,000
☐ \$100,001 \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____
(Describe)☐ Partnership ☐ Income Received of \$0 \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

☐ \$2,000 \$10,000 ☐ \$10,001 \$100,000
☐ \$100,001 \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____
(Describe)☐ Partnership ☐ Income Received of \$0 \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

☐ \$2,000 \$10,000 ☐ \$10,001 \$100,000
☐ \$100,001 \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other _____
(Describe)☐ Partnership ☐ Income Received of \$0 \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

ACQUIRED DISPOSED

Comments: _____

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 _____ |
| Lowe, Andrea H. |

▶ 1. BUSINESS ENTITY OR TRUST

Lowe Family Trust

Name
357 Hanover Avenue
Oakland CA 94606

Address (Business Address Acceptable)

Check one

☒ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

____/____/____
DISPOSED

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

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY 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

____/____/____
DISPOSED

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 BUSINESS ACTIVITY

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

____/____/____
DISPOSED

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

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY 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

____/____/____
DISPOSED

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 B
Interests in Real Property
(Including Rental Income)

Name

Lowe, Andrea H.

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

357 Hanover Avenue

CITY

Oakland CA 94606

FAIR MARKET VALUE

☐ \$2,000 \$10,000

☐ \$10,001 \$100,000

☒ \$100,001 \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/____
ACQUIRED

____/____/____
DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 \$499

☐ \$500 \$1,000

☐ \$1,001 \$10,000

☐ \$10,001 \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☒ None

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE

☐ \$2,000 \$10,000

☐ \$10,001 \$100,000

☐ \$100,001 \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/____
ACQUIRED

____/____/____
DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 \$499

☐ \$500 \$1,000

☐ \$1,001 \$10,000

☐ \$10,001 \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

* You are not required to report loans from commercial lending institutions 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

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 \$1,000

☐ \$1,001 \$10,000

☐ \$10,001 \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 \$1,000

☐ \$1,001 \$10,000

☐ \$10,001 \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

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

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Lowe, Andrea H.

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

A Squared Ventures

ADDRESS (Business Address Acceptable)

1970 Broadway Suite 1100
Oakland CA 94612

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Community Affairs Consulting

YOUR BUSINESS POSITION

Owner

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

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

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: _____