STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

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Please type or print in ink.				
NAME OF FILER (LAST)	(FIRST) (MIDDLE)			
Maness, Galen				
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:	Position:			
2. Jurisdiction of Office (Check at least one box)				
State	☐ Judge or Court Commissioner (Statewide Jurisdiction)			
Multi-County	County of			
X City of Oakland	·			
_ ,				
3. Type of Statement (Check at least one box)				
★ Annual: The period covered is January 1, 2012, through December 31, 2012 ★ Or-	Leaving Office: Date Left/			
The period covered is/, through December 31, 2012.	 The period covered is January 1, 2012, through the date of leaving office. 	of		
Assuming Office: Date assumed/	The period covered is/, through the of leaving office.	date		
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 attac	ched		
	Schedule D - Income - Gifts - schedule attached	000		
Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attache	ed		
-or-				
None - No reportable interests on any schedule				
5. Verification				
MAILING ADDRESS STREET (Business or Agency Address Recommended Public Document)	CITY STATE ZIP CODE			
P.O. Box 16271 P.O. Box 16271 O DAYTIME TELEPHONE NUMBER	Dakland CA 94610-6271 E MAIL ADDRESS (OPTIONAL)			
(415) 606-1831	gsmaness@gmail.com			
I have used all reasonable diligence in preparing this statement. I have herein and in any attached schedules is true and complete. I acknow	we reviewed this statement and to the best of my knowledge the information contact where the statement and to the best of my knowledge the information contact the statement and to the best of my knowledge the information contact the statement and to the best of my knowledge the information contact the statement and to the best of my knowledge the information contact the statement and to the best of my knowledge the information contact the statement and to the best of my knowledge the information contact the statement and to the best of my knowledge the information contact the statement and to the best of my knowledge the information contact the statement and to the best of my knowledge the information contact the statement and the statement	ained		
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
Date Signed 03/15/2013	Signatura			
Date Signed	Signature			

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	_	
Maness, Galen		
	_	

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Galen Maness	
Name 2720 13th Avenue	Name
Oakland CA 94606 Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 \$1,999	\$0 \$1,999
\$2,000 \$10,000	\$2,000 \$10,000 ——/———————————————————————————————
\$100,001 \$1,000,000	\$100,001 \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	► 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	\$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	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:	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location 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	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 \$10,000 \$10,001 \$100,000 \$100,001 \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:_