Date Signed \_\_\_\_\_\_06/28/2013

(month, day, year)

## STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Date Received Official Use Only

Please type or print in ink.

E-Filed on:

ID - 94737425 06/28/13 08:22:34 NAME OF FILER (LAST) (FIRST) (MIDDLE) Rodriguez, Victor 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. Position: \_ Agency: \_ 2. Jurisdiction of Office (Check at least one box) ☐ Judge or Court Commissioner (Statewide Jurisdiction) X County of Alameda Multi-County \_\_\_ X City of Oakland Other \_ 3. Type of Statement (Check at least one box) Leaving Office: Date Left \_\_\_\_/\_\_\_ X Annual: The period covered is January 1, 2012, through December 31, 2012 (Check one) -or-O The period covered is January 1, 2012, through the date of The period covered is \_\_\_\_\_\_\_, through leaving office. December 31, 2012. 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: \_ 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-X None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STRFFT CITY STATE ZIP CODE (Business or Agency Address Recommended Public Document) San Francisco Box 420603 DAYTIME TELEPHONE NUMBER E MAIL ADDRESS (OPTIONAL) (415)703-1173 vrodriguez@dir.ca.gov 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.

Signature \_

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