

STATEMENT OF ECONOMIC INTERESTS

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OAKLAND

Date Received
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Please type or print in ink

NAME (LAST) (FIRST) (MIDDLE) DAYTIME TELEPHONE NUMBER
BROWN JERRY (SIO)
MAILING ADDRESS (May be business address) STREET CITY ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS

COVER PAGE

1. Name of Office Sought or Held, Agency or Court (Provide precise name. Do not use acronyms.)

Division, Board, District, if applicable:

CITY OF OAKLAND

Position:

MAYOR

➔ If Expanded Statement – List agency/position:

(Attach a separate sheet if necessary. Do not use acronyms.
File originally signed statement with each filing official.)

Agency:

Position Title:

2. Office Jurisdiction (Check one)

☐ State

☐ County of _____

☒ City of **OAKLAND**

☐ Multi-County _____

☐ Other _____

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

☐ Assuming Office/Initial

Date: ____/____/____

☐ Annual

(Check one)

☐ The period covered is January 1, 2000, through December 31, 2000.

☐ The period covered is ____/____/____, through December 31, 2000.

☐ Leaving Office Date Left: ____/____/____

(Check one)

☐ The period covered is January 1, 2000, through the date of leaving office.

☐ The period covered is ____/____/____, through the date of leaving office.

☒ Candidate

4. Schedule Summary

(Check applicable schedules or "No reportable interests.")

➔ During the reporting period, did you have any reportable interests to disclose on:

Schedule A-1 ☐ Yes – schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes – schedule attached
Investments (Greater than 10% Ownership)

Schedule B ☒ Yes – schedule attached
Real Property

Schedule C ☒ Yes – schedule attached
Income & Business Positions (Income Other than Loans, Gifts, and Travel)

Schedule D ☐ Yes – schedule attached
Income – Loans

Schedule E ☐ Yes – schedule attached
Income – Gifts

Schedule F ☐ Yes – schedule attached
Income – Travel Payments

➔ ☐ No reportable interests on any schedule

Total number of pages (including this cover page): **2**

5. Verification

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

EXECUTED ON

(month, day, year)

SIGNATURE

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

