

**STATEMENT OF ECONOMIC INTERESTS**

**COVER PAGE**

3/30/2017 11:19:12 AM  
CITY CLERK

2017 MAR 31 PM 11:19:12  
SAN: 043000122-LAC-0025 MW

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
**Najarian Ara J**

**1. Office, Agency, or Court**

Agency Name  
Metropolitan Transportation Authority (MTA) / **Glendale City Council, Councilman**  
Division, Board, Department, District, if applicable  
**SCRRA** Your Position  
**Board Member**

► If filing for multiple positions, list below or on an attachment.  
San Fernando Valley Council of Governments / **Glendale City Council / SCRRA**  
Agency: \_\_\_\_\_ Position: **Board Representative**

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

State  Judge or Court Commissioner (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of \_\_\_\_\_  
 City of \_\_\_\_\_  Other **Authority's Jurisdiction**

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

**Annual:** The period covered is January 1, 2016, through December 31, 2016.  
-or-  
The period covered is \_\_\_\_\_, through December 31, 2016.  
 **Leaving Office:** Date Left \_\_\_\_\_ (Check one)  
 The period covered is January 1, 2016, through the date of leaving office.  
 The period covered is \_\_\_\_\_, through the date of leaving office.  
 **Assuming Office:** Date assumed \_\_\_\_\_  
 **Candidate:** Election Year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary (must complete)** ► Total number of pages including this cover page: 7

**Schedules attached**

**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. [Redacted]

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge and belief, 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 complete.

Date Signed 3/30/2017  
(month, day, year)

Signature \_\_\_\_\_ E-File  
(File the original signature)

**SCHEDULE A-1**  
**Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

*Do not attach brokerage or financial statements.*

<b>CALIFORNIA FORM 700</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <p align="center">Ara Najarian</p>

NAME OF BUSINESS ENTITY  
**Analy Capital Management**

GENERAL DESCRIPTION OF THIS BUSINESS

**REIT**

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  
**Amgen Inc**

GENERAL DESCRIPTION OF THIS BUSINESS

**Bio Med**

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 Electric**

GENERAL DESCRIPTION OF THIS BUSINESS

**Manufacturing**

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  
**MGM**

GENERAL DESCRIPTION OF THIS BUSINESS

**Casino resorts**

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  
**Intel Inc**

GENERAL DESCRIPTION OF THIS BUSINESS

**Chip Manufacturing**

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  
**Apple Inc**

GENERAL DESCRIPTION OF THIS BUSINESS

**computer**

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-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

Ara Najarian

NAME OF BUSINESS ENTITY: Actavis
GENERAL DESCRIPTION OF THIS BUSINESS: Pharmaceutical
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock

NAME OF BUSINESS ENTITY: Starbucks Inc
GENERAL DESCRIPTION OF THIS BUSINESS: Coffee
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

NAME OF BUSINESS ENTITY: Baxter Int'l Inc
GENERAL DESCRIPTION OF THIS BUSINESS: Pharmaceuticals
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

NAME OF BUSINESS ENTITY: Brocade Communications
GENERAL DESCRIPTION OF THIS BUSINESS: Telecommunications
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

NAME OF BUSINESS ENTITY: Daimler AG
GENERAL DESCRIPTION OF THIS BUSINESS: Automaker
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

NAME OF BUSINESS ENTITY: CYS Investments Inc
GENERAL DESCRIPTION OF THIS BUSINESS: REIT
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

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  
Ara Najarian

**▶ 1. BUSINESS ENTITY OR TRUST**

**Law Offices Of Ara Najarian PL**

Name  
500 N. Central Ave., #940, Glendale Ca 91203

Address (Business Address Acceptable)

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

---

**GENERAL DESCRIPTION OF THIS BUSINESS**  
**Law Firm**

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	_____ ACQUIRED _____ DISPOSED
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

**law corp**

NATURE OF INVESTMENT  
 Sole Proprietorship     Partnership     Other

YOUR BUSINESS POSITION owner

**▶ 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    or     Names listed below

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box.  
 INVESTMENT     REAL PROPERTY

500 N. Central Ave., Ste 940 Glendale CA

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property

**office Lease**

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	_____ ACQUIRED _____ DISPOSED
<input checked="" type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold 2 Yrs remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

**▶ 1 BUSINESS ENTITY OR TRUST**

**Najarian Family Partnership**

Name  
P.O. Box 37, la Canada Ca

Address (Business Address Acceptable)

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

---

**GENERAL DESCRIPTION OF THIS BUSINESS**  
**real estate investment**

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	_____ ACQUIRED _____ DISPOSED
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input checked="" type="checkbox"/> Over \$1,000,000	

NATURE OF INVESTMENT  
 Sole Proprietorship     Partnership     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    or     Names listed below

**▶ 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box.  
 INVESTMENT     REAL PROPERTY

2333 Mira Vista Ave, Montrose Ca

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property

**apt bldg**

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	_____ ACQUIRED _____ DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input checked="" type="checkbox"/> Over \$1,000,000	

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 A-2

### Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

Name  
Ara Najarian

**▶ 1. BUSINESS ENTITY OR TRUST**

**Franklin Court Aots LLC**  
Name  
200 N. Maryland Ave, Glendale Ca  
Address (Business Address Acceptable)  
Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**  
apt bldg

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	_____ ACQUIRED _____ DISPOSED
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input checked="" type="checkbox"/> Over \$1,000,000	<b>LLC</b>

NATURE OF INVESTMENT  
 Sole Proprietorship  Partnership  \_\_\_\_\_ 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 or  Names listed below

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT  REAL PROPERTY

114-126 Franklin Ct Glendale Ca  
Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property

apt bldgs  
Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	_____ ACQUIRED _____ DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input checked="" type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership

Leasehold \_\_\_\_\_  Other \_\_\_\_\_  
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

**▶ 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 THIS BUSINESS**

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	_____ ACQUIRED _____ DISPOSED
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INVESTMENT  
 Sole Proprietorship  Partnership  \_\_\_\_\_ 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 or  Names listed below

**▶ 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE 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:
<input type="checkbox"/> \$2,000 - \$10,000	_____ ACQUIRED _____ DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000	
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership

Leasehold \_\_\_\_\_  Other \_\_\_\_\_  
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

**SCHEDULE B**  
**Interests in Real Property**  
 (Including Rental Income)

Name  
 Ara Najarian

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
 225 St. katherine Dr.  
 CITY  
 La Canada

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  
 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 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  
 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)

<b>CALIFORNIA FORM</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small> <span style="font-size: 2em; font-weight: bold;">700</span>
Name <div style="text-align: center; border-top: 1px solid black; padding-top: 5px;">Ara Najarian</div>

**> 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Law Offices of Ara Najarian PLC

ADDRESS (Business Address Acceptable)  
500 N. Central Ave., Ste 940

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Law Firm

YOUR BUSINESS POSITION  
President

GROSS INCOME RECEIVED  No Income - Business Position Only

\$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  
(For self-employed use Schedule A-2.)  
 Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc)  
 Loan repayment  
 Commission or  Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
(Describe)  
 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  No Income - Business Position Only

\$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  
(For self-employed use Schedule A-2.)  
 Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc)  
 Loan repayment  
 Commission or  Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
(Describe)  
 Other \_\_\_\_\_  
(Describe)

**> 2. LOAN 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: \_\_\_\_\_