

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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 CITY OF RICHMOND

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NAME OF FILER (LAST) (FIRST) 2014 MAR 31 PM 4:23
 McLaughlin Gayle Ann

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Richmond

Division, Board, Department, District, if applicable

Your Position

Mayor

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: See Attachment

Position:

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of Richmond

Other _____

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

Annual: The period covered is January 1, 2013, through December 31, 2013.

Leaving Office: Date Left ____/____/____
 (Check one)

-or-

The period covered is ____/____/____, through December 31, 2013.

The period covered is January 1, 2013, 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: _____

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
 (Business or Agency Address Recommended - Public Document)
 450 Civic Center Plaza Richmond CA 94804

DAYTIME TELEPHONE NUMBER

E-MAIL ADDRESS (OPTIONAL)

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

3/31/2014
 (month, day, year)

Signature

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

Attachment

California Form 700

McLaughlin, Gayle Ann

Agency: Police & Fireman's Pension Board

Position: Member

Agency: West Contra Costa Transportation
Authority Commission (WCCTAC)

Position: Alternate Member

Agency: Marin Clean Energy

Position: Alternate Member