



Please type or print in ink.

NAME OF FILER (LAST)

(FIRST)

HOLMAN, JR.

ELBERT

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Stockton City Council

Division, Board, Department, District, if applicable

Your Position

District #1

Council Member

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

Agency: San Joaquin Council of Governments

Position: Board Member

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County

County of San Joaquin

City of Stockton

Other

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

Annual: The period covered is January 1, 2015, through December 31, 2015.

Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2015.

The period covered is January 1, 2015, through the date of leaving office.

-or-

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 (must complete) ► Total number of pages including this cover page: 2

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

herein and in any attached schedules is true and complete. I acknowledge this is a

I certify under penalty of perjury under the laws of the State of California that

Date Signed

3/24/16

(month, day, year)

Signature

OP 1832878 NF ✓

1.  $\frac{1}{x^2} = x^{-2}$   
 $\frac{d}{dx} x^{-2} = -2x^{-3} = -\frac{2}{x^3}$

2.  $\frac{1}{x^3} = x^{-3}$   
 $\frac{d}{dx} x^{-3} = -3x^{-4} = -\frac{3}{x^4}$

3.  $\frac{1}{x^4} = x^{-4}$   
 $\frac{d}{dx} x^{-4} = -4x^{-5} = -\frac{4}{x^5}$

**SCHEDULE D  
Income – Gifts**

<b>CALIFORNIA FORM 700</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small> Name <i>Elbert Holman</i>
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▶ NAME OF SOURCE (Not an Acronym)  
Philip Garr

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ADDRESS (Business Address Acceptable)  
17 High St., 3rd floor Norwalk, Ct. 06880

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BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Business Development

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 10 / 15	\$ 60.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
San Joaquin County Hispanic Chamber of Commerce

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ADDRESS (Business Address Acceptable)  
7500 West Lane, Stockton, Ca. 95210

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BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Chamber of Commerce

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 18 / 15	\$ 50.00	Luncheon ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
Anthony Barkett

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ADDRESS (Business Address Acceptable)

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BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Housing Developer

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 22 / 15	\$ 75.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
Mark Kindelberger

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ADDRESS (Business Address Acceptable)  
7210 Parkwoods Dr., Stockton, Ca. 95207

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BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Energy Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 02 / 15	\$ 75.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
Bob Guterrez

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ADDRESS (Business Address Acceptable)  
8014 Lower Sacramento Rd. Stockton, Ca. 95210

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 25 / 15	\$ 75.00	Tickets to Business Lun
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

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ADDRESS (Business Address Acceptable)

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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