

**STATEMENT OF ECONOMIC INTERESTS
 COVER PAGE**

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 APR 7 2016
 CLERK OF SUPERIOR COURT
 TRACY, CA

Please type or print in ink

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Young Nancy Diane

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
 City of Tracy
 Division, Board, Department, District, if applicable
 Tracy City Council
 Your Position
 Council Member

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

Agency: Capitol Valley Regional SAFE Position: Board Member

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

- State
- Multi-County SJ, Sac, Sutter, Yolo, Yuba, Placer, ED
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual:** The period covered is January 1, 2015, through December 31, 2015.
 -or-
 The period covered is _____, through December 31, 2015.
- Assuming Office:** Date assumed _____
- Candidate:** Election year 2016 and office sought, if different than Part 1: _____
- Leaving Office:** Date Left _____
 (Check one)
 The period covered is January 1, 2015, through the date of leaving office.
 -or-
 The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 5

Schedules attached

- Schedule A-1 - Investments** – schedule attached
- Schedule A-2 - Investments** – schedule attached
- Schedule B - Real Property** – schedule attached
- Schedule C - Income, Loans, & Business Positions** – schedule attached
- Schedule D - Income – Gifts** – schedule attached
- Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-
 None - No reportable interests on any schedule

5. [Redacted area]

I have used all reasonable diligence in preparing this statement. I have reviewed the herein and in any attached schedules is true and complete. I acknowledge this is

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

Date Signed 04/07/2016 Signature _____
 (month, day, year)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST

20/20 Vision Books and Design, Inc.
Name
1517 Arrigotti Lane, Tracy, CA 95377
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Book Publishing and Design

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE
<input type="checkbox"/> \$0 - \$1,999	
<input checked="" type="checkbox"/> \$2,000 - \$10,000	04 / 29 / 15 ____ / ____ / 15
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Corporation
Other _____

YOUR BUSINESS POSITION Spouse (of CEO/Self Employed)

▶ 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	
<input type="checkbox"/> \$10,001 - \$100,000	____ / ____ / 15 ____ / ____ / 15
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<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

Comments:
His Image/JBY Designs, Sole Proprietor
(Self-employed spouse)
was disposed 02/01/2015 less than \$2K

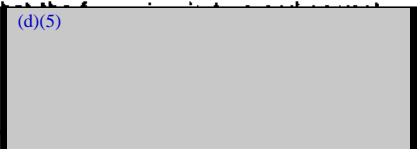
Filer's Verification

Print Name Nancy D. Young
Office, Agency or Court City of Tracy
Statement Type 2015/2016 Annual _____ Annual Assuming Leaving Candidate
(yr)

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 information provided is true and correct.

Date Signed 04/07/2016 Filer's Signature
(month, day, year)



SCHEDULE B
Interests in Real Property
(Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1517 Arrigotti Lane

CITY
Tracy

FAIR MARKET VALUE IF APPLICABLE, LIST DATE
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE
____/____/15 ____/____/15
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

IF APPLICABLE, LIST DATE
____/____/15 ____/____/15
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

Filer's Verification

Print Name Nancy D. Young

Office, Agency or Court City of Tracy

Statement Type 2015/2016 Annual Assuming Leaving
 _____ Annual Candidate
(yr)

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.

Date Signed 04/07/2016

Filer's Signature (d)(5)

Comments: Residence is for personal family use, but business claimed bu

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
JP Morgan Chase

ADDRESS (Business Address Acceptable)
7077 Koll Center Pkwy., 200, Pleasanton, CA 94566

BUSINESS ACTIVITY, IF ANY OF SOURCE

YOUR BUSINESS POSITION
Employee

GROSS INCOME RECEIVED
 \$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)

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
 \$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)

Comments: _____

▶ 2. LOANS 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)

Filer's Verification

Print Name Nancy D. Young Office, Agency or Court City of Tracy

Statement Type 2015/2016 Annual _____ Annual Assuming Leaving Candidate
 (yr)

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 th (d)(5)

Date Signed 04/07/2016 Filer's Signature _____
 (month, day, year)

SCHEDULE D Income – Gifts

▶ NAME OF SOURCE (Not an Acronym)
Rhodesia Ransom/Delta Crab Feed
ADDRESS (Business Address Acceptable)
724 Billy F. Freeman Lane, Tracy, CA 95376
BUSINESS ACTIVITY IF ANY, OF SOURCE
Sorority Fundraiser

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 31 / 15</u>	<u>\$ 50.00</u>	<u>1 Crab Feed Ticket</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Schneider Electric
ADDRESS (Business Address Acceptable)
7210 Parkwoods Drive, Stockton, CA 95207
BUSINESS ACTIVITY IF ANY, OF SOURCE
Energy Consulting/Engineering

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 01 / 15</u>	<u>\$ 100.00</u>	<u>1 Dinner</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Tracy Fire Fighters Association IAFF Local 3355
ADDRESS (Business Address Acceptable)
P O Box 185, Tracy, CA 95378
BUSINESS ACTIVITY IF ANY, OF SOURCE
Fire Fighters Union

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 20 / 15</u>	<u>\$ 80.00</u>	<u>2 Crab Feed Tickets</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
C.J. Lake, LLC
ADDRESS (Business Address Acceptable)
525 9th St. NW Suite 88, Washington D C. 20004
BUSINESS ACTIVITY IF ANY, OF SOURCE
Lobbyist for San Joaquin Council of Governments

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 21 / 15</u>	<u>\$ 150.00</u>	<u>2 Baseball Tickets</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

Filer's Verification

Print Name Nancy D. Young

Office, Agency or Court City of Tracy

Statement Type 2015/2016 Annual Assuming Leaving
 _____ Annual Candidate
(yr)

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.

Date Signed 04/07/2016

Filer's Signature (d)(5)

Comments: _____

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Initial Filing Received
Office Use Only

RECEIVED
MAR 29 2016

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Young Nancy Diane

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Tracy

Division, Board, Department, District, if applicable

Tracy City Council

Your Position

Council Member

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

Agency: _____ Position: _____

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of Tracy

Other _____

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

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

-or-

The period covered is _____, through December 31, 2015.

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

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

-or-

The period covered is _____, through the date of leaving office.

Assuming Office: Date assumed ____/____/____

Candidate: Election year 2016 and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 5

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

(d)(5)

(d)(5)

Date Signed 03/29/2016
(month, day, year)

Signature

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

Name
Nancy D. Young

▶ 1. BUSINESS ENTITY OR TRUST

20/20 Vision Books and Design, Inc.

Name

1517 Arrigotti Lane, Tracy, CA 95377

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

- \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

04 / 29 / 15 / / 15
ACQUIRED DISPOSED

NATURE OF INVESTMENT

- Partnership Sole Proprietorship Corporation Other

YOUR BUSINESS POSITION Spouse (CEO/Self Employed)

▶ 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

- \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

 / / 15 / / 15
ACQUIRED DISPOSED

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: _____

▶ 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

- \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

 / / 15 / / 15
ACQUIRED DISPOSED

NATURE OF INVESTMENT

- Partnership Sole Proprietorship 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

- \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

 / / 15 / / 15
ACQUIRED DISPOSED

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

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name
 Nancy D. Young

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 1517 Arrigotti Lane

CITY
 Tracy

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 ACQUIRED / / 15 DISPOSED / / 15

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
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 ACQUIRED / / 15 DISPOSED / / 15

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: Residence is for personal family use, but business claimed business use of home in 2015

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Nancy D. Young

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 JP Morgan Chase

ADDRESS (Business Address Acceptable)
 7077 Koll Center Pkwy., 200, Pleasanton, CA 94566

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION
 Employee

GROSS INCOME RECEIVED
 \$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
 \$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. LOANS 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: _____

SCHEDULE D
Income – Gifts

Name
 Nancy D. Young

▶ NAME OF SOURCE (Not an Acronym)
 Rhodesia Ransom/Delta Crab Feed

ADDRESS (Business Address Acceptable)
 724 Billy F. Freeman Lane, Tracy, CA 95376

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 31 / 15	\$ 50.00	1 Crab Feed Ticket
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)
 Schneider Electric

ADDRESS (Business Address Acceptable)
 7210 Parkwoods Drive, Stockton, CA 95207

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Energy Consulting/Engineering

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 01 / 15	\$ 100.00	1 Dinner
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)
 Tracy Fire Fighters Association IAFF Local 3355

ADDRESS (Business Address Acceptable)
 P.O. Box 185, Tracy, CA 95378

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Fire Fighters Union

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 20 / 15	\$ 80.00	2 Crab Feed Tickets
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE (Not an Acronym)
 C.J. Lake, LLC

ADDRESS (Business Address Acceptable)
 525 9th St. NW Suite 88, Washington D.C. 20004

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Lobbyist for San Joaquin Council of Governments

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 21 / 15	\$ 150.00	2 Baseball Tickets
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Comments: _____