#### CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTEREST'S UEIVEL Date Received Official Use Only CITY CLERK COVER PAGE UNG BEACH, CALIF

| Please type or print in ink.   | II MAR 30   | PM 4: 43                             |
|--|---|--------------------------------------|
| NAME OF FILER (LAST)   | (FIRST)   | (MIDDLE)                             |
| FOSTER   | ROBERT  | G                                    |
| 1. Office, Agency, or Court  |   |                                      |
| Agency Name  |   |                                      |
| CITY OF LONG BEACH   |   | 크 크림 #                               |
| Division, Board, Department, District, if applicable                   | Your Position                                     | m PO                                 |
| LEGISLATIVE DEPARTMENT   | CITY MAYOR  | 7 000                                |
| ► If filing for multiple positions, list below or on an attachment.    |   | PH OTE                               |
| Agency:  | Position:   | 1 2: 2                               |
| 2. Jurisdiction of Office (Check at least one box)                     | -   | 0 Z                                  |
| ☐ State  | ☐ Judge (Statewide Jurisdiction)                  | <del></del>                          |
| Multi-County   | County of   |                                      |
| ⊠ City of LONG BEACH   | Other   |                                      |
| <u> </u>   |   |                                      |
| 3. Type of Statement (Check at least one box)                          |   |                                      |
| Annual: The period covered is January 1, 2010, through Decembe 2010.   | er 31, Leaving Office: Date Left/_<br>(Check one) |                                      |
| The period covered is/, through December 2010.                         | The period covered is January 1, leaving office.  | 2010, through the date of            |
| Assuming Office: Date  | The period covered is of leaving office.          | , through the date                   |
| Candidate: Election Year Office sought, i                              | if different than Part 1:                         |                                      |
| 4. Schedule Summary  |   | П                                    |
| 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 a          |                                      |
| Schedule B - Real Property schedule attached                           | Schedule E - Income - Gifts - Travel Payı         | ments – schedule attached            |
| -or-   |   |                                      |
| None - No reportable in  | iterests on any schedule                          |                                      |
|  |   |                                      |
|  |   |                                      |
|  |   |                                      |
|  |   |                                      |
|  |   |                                      |
|  |   |                                      |
| herein and in any attached schedules is true and complete. 1 acknowled | age this is                                       |                                      |
| I certify under penalty of perjury under the laws of the State of Cali | fornia that                                       |                                      |
| 3/30/11  |   |                                      |
| Date Signed 5/30/07 (month, day, year)                                 | Signatur  |                                      |
|  |   |                                      |
|  |   | <del>reforonii 100 (2010/2011)</del> |

## **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 CO | MMISSION |
|                             |          |
| Name                        |          |

ROBERT G. FOSTER

|             | NAME OF BUSINESS ENTITY   | ▶           | NAME OF BUSINESS ENTITY   |
|-------------|---|-------------|---|
|             | Various Diversified Mutual Funds  |             | Various Governmental Bonds, including   |
|             | GENERAL DESCRIPTION OF BUSINESS ACTIVITY  |             | GENERAL DESCRIPTION OF BUSINESS ACTIVITY  |
|             | Registered with the SEC   |             | Municipal Bonds   |
|             | FAIR MARKET VALUE   |             | FAIR MARKET VALUE   |
|             | \$2,000 - \$10,000  | Į.          | \$2,000 - \$10,000 \$10,001 - \$100,000   |
|             | \$100,001 - \$1,000,000 \over \$1,000,000   |             | \$100,001 - \$1,000,000   |
|             | NATURE OF INVESTMENT Mutual Funds  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |             | NATURE OF INVESTMENT  Stock  Other  Other  (Describe)  Partnership  Oncome Received of \$0 - \$499  Oncome Received of \$500 or More (Report on Schedule C) |
|             | IF APPLICABLE, LIST DATE:   |             | IF APPLICABLE, LIST DATE:   |
|             |   |             |   |
| <b>&gt;</b> | NAME OF BUSINESS ENTITY   | <b>&gt;</b> | NAME OF BUSINESS ENTITY   |
|             | CA Municipal Money Market   |             | Ice Energy, Inc.  |
| ·           | GENERAL DESCRIPTION OF BUSINESS ACTIVITY  |             | GENERAL DESCRIPTION OF BUSINESS ACTIVITY  |
|             | Municipal Bonds   | l           | Appliance Energy Technology   |
|             |   |             |   |
|             | FAIR MARKET VALUE   |             | FAIR MARKET VALUE   |
|             |   |             | \$2,000 - \$10,000  |
|             | S100,001 - \$1,000,000 Over \$1,000,000   |             | S100,001 - \$1,000,000 Over \$1,000,000   |
| ·<br>       | NATURE OF INVESTMENT Money Market Funds  ☐ Stock       Money Market Funds   |             | NATURE OF INVESTMENT Options  Stock Other   |
|             | (Describe)  Partnership (Income Received of \$0 - \$499   |             | (Describe)  Partnership (Income Received of \$0 - \$499)  |
|             | Income Received of \$500 or More (Report on Schedule C)   |             | O Income Received of \$500 or More (Report on Schedule C)   |
|             | IF APPLICABLE, LIST DATE:   |             | IF APPLICABLE, LIST DATE:   |
|             | IF AFFLICABLE, LIST DATE.   |             | IF AFFLICABLE, LIST DATE.   |
|             | /   |             | //  |
|             | Addition State Octo   |             | AND DIO OLD   |
| <b>•</b>    | NAME OF BUSINESS ENTITY   | •           | NAME OF BUSINESS ENTITY   |
| i           | GENERAL DESCRIPTION OF BUSINESS ACTIVITY  | l           | GENERAL DESCRIPTION OF BUSINESS ACTIVITY  |
|             |   |             |   |
|             | FAID MADIZET VALUE  |             | FAID MADIZET VALUE  |
|             | FAIR MARKET VALUE   |             | FAIR MARKET VALUE   |
| ļ           | \$2,000 - \$10,000 \$10,001 - \$100,000   |             | \$2,000 - \$10,000  |
| Į.          | \$100,001 - \$1,000,000 Over \$1,000,000  |             | [] \$100,001 - \$1,000,000 [] Over \$1,000,000  |
| i           | NATURE OF INVESTMENT  |             | NATURE OF INVESTMENT  |
| ĺ           | Stock Other   |             | Stock Other   |
| ſ           | (Describe)  |             | (Describe)  |
| l           | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)  |             | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)  |
| ı           | F APPLICABLE, LIST DATE:  |             | IF APPLICABLE, LIST DATE:   |
|             | / / 10 / / 10   |             | / / 10 / / 10   |
| •           | ACQUIRED DISPOSED   |             | ACQUIRED DISPOSED   |
| C e :       | mmonts:   | 1           |   |

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

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name

ROBERT G. FOSTER

| A OTDETT ADDRESS OD BORGISE LOGATION   | ATTEST ADDRESS OF PRESIDE LOCATION  |
|--|---|
| STREET ADDRESS OR PRECISE LOCATION   | STREET ADDRESS OR PRECISE LOCATION  |
| 55306 Firestone  |   |
| CITY   | CITY  |
| La Quinta, California  |   |
| FAIR MARKET VALUE  \$\begin{array}{cccccccccccccccccccccccccccccccccccc  | FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000                              |
| NATURE OF INTEREST   | NATURE OF INTEREST  |
| Ownership/Deed of Trust Easement   | Ownership/Deed of Trust Easement  |
| Leasehold  | Leasehold   |
| IF RENTAL PROPERTY, GROSS INCOME RECEIVED  | IF RENTAL PROPERTY, GROSS INCOME RECEIVED   |
| \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000   | \$0 - \$499   |
| ∑ \$10,001 - \$100,000 ☐ OVER \$100,000  | S10,001 - \$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.                | 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.           |
| * You are not required to report loans from commercial of business on terms available to members of the put and loans received not in a lender's regular course of | lending institutions made in the lender's regular course olic without regard to your official status. Personal loans f business must be disclosed as follows: |
| NAME OF LENDERS  | NAME OF LENDER*   |
| NAME OF LENDER*  | NAME OF LENDER  |
| ADDRESS (Business Address Acceptable)  | ADDRESS (Business Address Acceptable)   |
| BUSINESS ACTIVITY, IF ANY, OF LENDER   | BUSINESS ACTIVITY, IF ANY, OF LENDER  |
| INTEREST RATE TERM (Months/Years)  | INTEREST RATE TERM (Months/Years)   |
| %  | %   |
| HIGHEST BALANCE BURNE BERGERING TOTAL  | Weller an aver prove proven access to   |
| HIGHEST BALANCE DURING REPORTING PERIOD  | HIGHEST BALANCE DURING REPORTING PERIOD   |
| \$500 - \$1,000  | \$500 - \$1,000 \$1,001 - \$10,000  |
| [] \$10,001 - \$100,000  | S10,001 - \$100,000 OVER \$100,000  |
| ☐ Guarantor, if applicable   | Guarantor, if applicable  |
| <b>!</b>   | 1   |
| Comments:  |   |

## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

| CALIFORNIA FORM |     |
|-----------------|-----|
| Name            |     |
| ROBERT G FOS    | TER |

| 1. INCOME RECEIVED   | ► 1. INCOME RECEIVED  |
|--|---|
| NAME OF SOURCE OF INCOME   | NAME OF SOURCE OF INCOME  |
| PCP Yamaha - Promissory Note Receivable  | Statewide Storage Antioch   |
| ADDRESS (Business Address Acceptable)  | ADDRESS (Business Address Acceptable)   |
| Sacramento, California   |   |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE   | BUSINESS ACTIVITY, IF ANY, OF SOURCE  |
| Retail   | Storage   |
| YOUR BUSINESS POSITION   | YOUR BUSINESS POSITION  |
| <u>n/a</u>   | Limited Partner   |
| GROSS INCOME RECEIVED  | GROSS INCOME RECEIVED   |
| \$500 - \$1,000 \qquad \qqquad \qqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqq | □ \$500 - \$1,000 ⊠ \$1,001 - \$10,000  |
|  | S10,001 - \$100,000 OVER \$100,000  |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED  | CONSIDERATION FOR WHICH INCOME WAS RECEIVED   |
| Salary Spouse's or registered domestic partner's income  | Salary Spouse's or registered domestic partner's income   |
| ☐ Loan repayment ☐ Partnership   | ☐ Loan repayment ☐ Partnership  |
| Sale of  | Sale of   |
| (Property, cer, boat, etc.)  | (Property, car, boat, etc.)   |
| Commission or Rental Income, list each source of \$10,000 or more  | Commission or Rental Income, list each source of \$10,000 or more   |
| Other Interest received on loan made to others (Describe)  | Other Limited Partner Distributions (Describe)  |
| of a retail installment or credit card transaction, made   | I lending institutions, or any indebtedness created as pare<br>e in the lender's regular course of business on terms<br>your official status. Personal loans and loans received |
| NAME OF LENDER*  | INTEREST RATE TERM (Months/Years)   |
| ADDRESS (Business Address Acceptable)  | %   |
| NDB. (200 (Business Addition Acceptable)   | SECURITY FOR LOAN   |
| BUSINESS ACTIVITY, IF ANY, OF LENDER   | None Personal residence   |
|  | _   |
|  | Real Property   |
| HIGHEST BALANCE DURING REPORTING PERIOD  |   |
| \$500 - \$1,000  | City  |
| [ \$1,001 - \$10,000   | Guarantor   |
| \$10,001 - \$100,000   | _   |
| OVER \$100,000   | Other(Describe)   |
| Comments:  |   |
|  |   |

## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name  |
| ROBERT G. FOSTER  |

| NAME OF SOURCE OF INCOME   | NAME OF SOURCE OF INCOME   |
|--|--|
| California ISO   |  |
| ADDRESS (Business Address Acceptable)  | ADDRESS (Business Address Acceptable)  |
| P.O. Box 639014  | H  |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE   | BUSINESS ACTIVITY, IF ANY, OF SOURCE   |
| YOUR BUSINESS POSITION   | YOUR BUSINESS POSITION   |
| Board Governor   |  |
| GROSS INCOME RECEIVED  | GROSS INCOME RECEIVED  |
| ☐ \$500 <b>-</b> \$1,000 ☐ \$1,001 <i>-</i> \$10,000   | ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000   |
| ▼ \$10,001 - \$100,000 □ OVER \$100,000  | S10,001 - \$100,000 OVER \$100,000   |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED  | CONSIDERATION FOR WHICH INCOME WAS RECEIVED  |
|  | Salary Spouse's or registered domestic partner's income  |
| Loan repayment Partnership   | ☐ Loan repayment ☐ Partnership   |
| Sale of  | ☐ Sale of  |
| Sale of(Property, car, boat, etc.)   | Sale of(Property, car, boat, etc.)   |
| Commission or Rental Income, list each source of \$10,000 or more  | Commission or Rental Income, list each source of \$10,000 or more  |
| <u>·                                     </u>  |  |
|  |  |
| <del>-</del>   |  |
| Other(Describe)  | Other(Describe)  |
| Other(Describe)  | Other(Describe)  |
| Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER  | (Describe)   |
| *You are not required to report loans from commercial of a retail installment or credit card transaction, made   | l lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received  |
| 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER  * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to  | l lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received  |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be  | l lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  |
| *You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be   | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  None  None   |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)   | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  None  SECURITY FOR LOAN   |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be  | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  None  None   |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER   | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  None  SECURITY FOR LOAN   |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD                                      | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  Mone  SECURITY FOR LOAN  Personal residence   |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER   | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  Mone  SECURITY FOR LOAN  Personal residence   |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD                                      | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  None  SECURITY FOR LOAN  None  Personal residence  Sireet address  City   |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000                     | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  None  SECURITY FOR LOAN  None  Personal residence  Real Property  Street address  |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000                     | Clescribe   City   Clescribe   City   Clescribe   City   Clescribe   Clescri |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be 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 | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  None  SECURITY FOR LOAN  None  Personal residence  Sireet address  City   |
| * You are not required to report loans from commercial of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be 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 | I lending institutions, or any indebtedness created as page in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  None  SECURITY FOR LOAN  None  Personal residence  Street address   |

### SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

ROBERT G. FOSTER

| ► NAME OF SOURCE | E                    |                        | ► NAME OF SOURCE | ≣                  |                        |   |
|------------------|----------------------|------------------------|------------------|--------------------|------------------------|---|
| Mike Roos        |                      |                        | Larry Labrado    | ı                  |                        |   |
| ADDRESS (Busine  | ss Address Acceptab  | le)                    | ADDRESS (Busines | s Address Acceptab | ole)                   | • |
|                  |                      |                        | Southern Cali    | fornia Edison      |                        |   |
| BUSINESS ACTIVI  | TY, IF ANY, OF SOU   | RCE                    | BUSINESS ACTIVIT | Y, IF ANY, OF SOU  | IRCE                   | - |
|                  |                      |                        | Library Found    | ation Dinner       |                        |   |
| DATE (mm/dd/yy)  | VALUE                | DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy)  | VALUE              | DESCRIPTION OF GIFT(S) | - |
| 12,04,10         | \$99.00              | Rendevouz Baby Back    | 6,27,10          | \$350.00           | 2 Tickets for Mayor &  | - |
|                  | \$                   | Ribs (2 slabs, popcorn |                  | \$                 | his wife (sat at SCE   | - |
|                  | \$                   | BBQ Sauce, etc.)       |                  | \$                 | Table)                 | - |
| ► NAME OF SOURC  | E                    |                        | ► NAME OF SOURCE |                    |                        |   |
| ADDRESS (Busines | ss Address Acceptab  | de)                    | ADDRESS (Busines | s Address Acceptab | ole)                   | - |
| BUSINESS ACTIVIT | TY, IF ANY, OF SOU   | RCE                    | BUSINESS ACTIVIT | Y, IF ANY, OF SOU  | RCE                    | • |
| DATE (mm/dd/yy)  | VALUE                | DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy)  | VALUE              | DESCRIPTION OF GIFT(S) | • |
|                  | \$                   |                        |                  | \$                 |                        | - |
|                  | \$                   |                        |                  | \$                 |                        | - |
|                  | \$                   |                        |                  | \$                 |                        | - |
| ► NAME OF SOURCE | E                    |                        | ► NAME OF SOURCE | i                  |                        |   |
| ADDRESS (Busines | ss Address Acceptabl | (e)                    | ADDRESS (Busines | s Address Acceptab | le)                    |   |
| BUSINESS ACTIVIT | TY, IF ANY, OF SOU   | RCE                    | BUSINESS ACTIVIT | Y, IF ANY, OF SOU  | RCE                    | • |
| DATE (mm/dd/yy)  | VALUE                | DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy)  | VALUE              | DESCRIPTION OF GIFT(S) | • |
|                  | \$                   |                        |                  | \$                 |                        | - |
|                  | \$                   |                        |                  | \$                 |                        | • |
|                  | \$                   |                        |                  | \$                 |                        | - |
| Comments:        |                      |                        | <u>-</u>         |                    |                        | - |

# SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name  |
| ROBERT G. FOSTER  |

- Reminder you must mark the gift or income box.
- · You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

| ► NAME OF SOURCE   | ► NAME OF SOURCE                                |
|--|---|
| California ISO   |   |
| ADDRESS (Business Address Acceptable)  | ADDRESS (Business Address Acceptable)           |
| P.O. Box 639014  |   |
| CITY AND STATE   | CITY AND STATE                                  |
| Folsom, Ca   |   |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)  | BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3) |
| DATE(S): 01 / 01 / 10 - 12 / 31 / 10 AMT: \$ 5,967.00                                    | DATE(S):/                                       |
| TYPE OF PAYMENT: (must check one) Gift X Income  | TYPE OF PAYMENT: (must check one) Gift Income   |
| DESCRIPTION: Travel reimbursements for meetings attended as a Governor on the ISO Board. | DESCRIPTION:                                    |
|  |   |
| ► NAME OF SOURCE   | ► NAME OF SOURCE                                |
| ADDRESS (Business Address Acceptable)  | ADDRESS (Business Address Acceptable)           |
| CITY AND STATE   | CITY AND STATE                                  |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)  | BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3) |
| DATE(S):   | DATE(S):/                                       |
| TYPE OF PAYMENT: (must check one) Gift Income  | TYPE OF PAYMENT: (must check one) Gift Income   |
| DESCRIPTION:   | DESCRIPTION:                                    |
| Comments:  |   |
|  |   |