#### CALIFORNIA FORM ( ) ( ) FAIR POLITICAL PRACTICES COMMISSION

#### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

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	BY:	1	/ 			
-		1				

Please type or print in ink. (MIDDLE) NAME OF FILER (LAST) (FIRST) Caspary **Patrick** Charles 1. Office, Agency, or Court Agency Name (Do not use acronyms) Las Virgenes - Triunfo Joint Powers Authority Your Position Division, Board, Department, District, if applicable Director - Las Virgenes **Board of Directors** ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) 2. Jurisdiction of Office (Check at least one box) Judge, Retired Judge, Pro Tem Judge, or Court Commissioner ☐ State (Statewide Jurisdiction) County of ✓ Multi-County Los Angeles/Ventura ☐ City of 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2020, through Leaving Office: Date Left \_\_\_ (Check one circle.) December 31, 2020. O The period covered is January 1, 2020, through the date of The period covered is \_\_\_\_\_/\_\_\_\_ leaving office. December 31, 2020. -or-O The period covered is \_\_\_ the date of leaving office. Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1:\_\_ 4. Schedule Summary (must complete) ► Total number of pages including this cover page: Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached -or- None - No reportable interests on any schedule 5. Verification ZIP CODE STATE MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document) 91302 CA 4232 Las Virgenes Road Calabasas **EMAIL ADDRESS** DAYTIME TELEPHONE NUMBER (818) 251-2100 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, Signature **Date Signed** Hicial.) ے۔ رسم اور سال لیا۔

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

Investments must be itemized.

CALIFORNIA FORM 70	0
FAIR POLITICAL PRACTICES COMMISSI	ON
Name	
Charles Patrick Caspary	

	e or financial statements.
FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000
NATURE OF INVESTMENT  Stock Other  (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:  4 16 20 120  ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE:  05 20
FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  NATURE OF INVESTMENT  Stock  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)	FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  NATURE OF INVESTMENT  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: //20//20  ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE:
MAME OF BUSINESS ENTITY  Adverum Blo Tech  GENERAL DESCRIPTION OF THIS BUSINESS  Pharmaceut, call  FAIR MARKET VALUE  \$2,000 - \$10,000	NAME OF BUSINESS ENTITY  AHECUX INC  GENERAL DESCRIPTION OF THIS BUSINESS  Date Market Value  S2,000 - \$10,000  \$ \$10,001 - \$100,000

**\$100,001 - \$1,000,000** 

**★** Stock

NATURE OF INVESTMENT

IF APPLICABLE, LIST DATE:

Other \_

Partnership O Income Received of \$0 - \$499

\$100,001 - \$1,000,000

Stock

NATURE OF INVESTMENT

IF APPLICABLE, LIST DATE:

Other

Partnership O Income Received of \$0 - \$499

Over \$1,000,000

O Income Received of \$500 or More (Report on Schedule C)

Over \$1,000,000

(Describe)

O Income Received of \$500 or More (Report on Schedule C)

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

Investments must be itemized. Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Charles Patrick Caspary

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Altro Gran	Apple Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Tobacco	<u>Camputers</u> , telephones
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 <b>∑</b> \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499 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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /20 / /20	/ /20 / /20
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Amazon com star	1 Prema Co
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Internet Sales	Direct mes
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	<b>\$2,000 - \$10,000 \$10,001 - \$100,000</b>
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X) Stock Other	Stock Other
(Describe)  Partnership () Income Received of \$0 - \$499	(Describe)  Partnership O Income Received of \$0 - \$499
O 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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Ames I	1  Q  U  11111  -T
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
PI	GENERAL DESCRIPTION OF THIS BUSINESS
Tharmaceuticals	travel agency
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
○ Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /20 / /20	12/11/20 / 20
ACQUIRED DISPOSED	ACQUIRED DISPOSED
i	
Comments:	

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

Investments must be itemized. Do not attach brokerage or financial statements. CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Charles Patrick Caspary

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Bedon Didensin & Co	Briefa-Meners Saubh
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Medical Supplies	Thomacoutical
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$2,000 - \$10,000 \$100,000 Over \$1,000,000
NATURE OF INVESTMENT  ▼J, Stock	NATURE OF INVESTMENT  X Stock ☐ Other
(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//20	
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Business Investments	Insurance
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$2,000 - \$10,000 \$100,000 Over \$1,000,000
NATURE OF INVESTMENT  Stock Other	NATURE OF INVESTMENT  Stock Other Other
(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	S means reasoned at those propertion considere by
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Institutional Truestments	Consumer products
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 <b></b>	\$2,000 - \$10,000 <u>X</u> \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  Nature OF INVESTMENT  Nature Of Investment	NATURE OF INVESTMENT  ☑ Stock ☐ Other
(Describe)  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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//20//20	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

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

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES	COMMISSION

Charles Patrick Caspary

NAME OF BUSINESS ENTITY  CONSTELLATION BROWS	NAME OF BUSINESS ENTITY  EDUCADS LIFE SCIENCES
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Ligur + WINES	thermoconticits
FAIR MARKET VALUE  ☐ \$2,000 - \$10,000  X \$10,001 - \$100,000	FAIR MARKET VALUE  \$2,000 - \$10,000 \$310,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,000 \$1,000,000
NATURE OF INVESTMENT Stock Other(Describe)	NATURE OF INVESTMENT  Stock Other
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
MAME OF BUSINESS ENTITY  Cost of this business  GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Consumer goods	Vetorary sucs
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 / \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT  Stock Other
(Describe)  Partnership (Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//20//20 ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	Health Equity Inc GENERAL DESCRIPTION OF THIS BUSINESS
Enuronment 1 Smaror	Pharma
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000  ☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	\$2,000 - \$10,000 X \$10,001 - \$100,000  \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock (Describe)	Stock Other (Describe)
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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

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

Investments must be itemized

Investments must be itemized. Do not attach brokerage or financial statements. CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Charles Patrick Caspary

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Home Deat Tro	Emerson Fleetric
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
10 10 10 501	TO I'D DO
Tarduage Shilding Jupples	Indiestral Coleds
FAIR MARKET VALUE \$2,000 - \$10,000 \$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000
1 \$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  Stock Other	NATURE OF INVESTMENT  Stock Other
(Describe)	(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ 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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, 20 , 20	54:22.00 (19.00
//	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Honeywood Intl Inc	Intercontinental Execut
GENERAL DESCRIPTION OF THIS BUSINESS	CENTER AL DECORPORION OF THE PROPERTY OF THE P
Todadail / Account	GENERAL DESCRIPTION OF THIS BUSINESS
_ Industrial / Repositore	Sensone Segrencing Instruments
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X)\$10,001 - \$100,000 Y	\$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O 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:
	CC 21 00
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Illumina Inc	I dow Lobs
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Commo Samon into moto	Pa + 1=
Genome Sequencia instruments	1 normacut (cul)
FAIR MARKET VALUE \$ \$ \$2,000 - \$10,000 \$ \$10,001 - \$100,000	FAIR MARKET VALUE  \$\infty\$ \sum_{\text{\$\subseteq}} \sum_{\$\subs
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe)
☐ Partnership ☐ Income Received of \$00 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
16 / 15/20 / /20	03, 17,20 63,23,20
ACQUIRED DISPOSED	ACQUIRED DISPOSED
'	

Comments:

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

Investments must be itemized. Do not attach brokerage or financial statements. CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Charles Patrick Caspary

MAME OF BUSINESS ENTITY  JOHNSON AND THIS BUSINESS  GENERAL DESCRIPTION OF THIS BUSINESS	NAME OF BUSINESS ENTITY  Diamondoud Energy  GENERAL DESCRIPTION OF THIS BUSINESS
health Care product  FAIR MARKET VALUE  \$10,001 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Sver \$1,000,000
NATURE OF INVESTMENT  Stock Other (Describe)	NATURE OF INVESTMENT  Stock Other (Describe)
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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
07/3\/20 //20 ACQUIRED DISPOSED	01/83/20 02/26/20 ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY  P Morgan Chica	NAME OF BUSINESS ENTITY  KODOL SCIENCES
GENERAL DESCRIPTION OF THIS BUSINESS	Promer sites
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$10,001 - \$10,000
NATURE OF INVESTMENT  ☑ Stock ☐ Other	NATURE OF INVESTMENT  Stock Other
(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//20//20 ACQUIRED DISPOSED	O7 21 20
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Haising Development	Hotels/Casinos
FAIR MARKET VALUE  ☐ \$2,000 - \$10,000  → \$10,001 - \$100,000	FAIR MARKET VALUE
\$1,000,001 - \$1,000,000 Over \$1,000,000	\$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  Stock ☐ Other	NATURE OF INVESTMENT  Stock Other
Partnership   Income Received of \$0 - \$499   Income Received of \$500 or More (Report on Schedule C)	☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
07,33,20 / 20 ACQUIRED DISPOSED	
Comments:	

#### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF

FAIR MARKET VALUE \$2,000 - \$10,000

\$100,001 - \$1,000,000

Stock

NATURE OF INVESTMENT

IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY

**ACQUIRED** 

FAIR MARKET VALUE \$2,000 - \$10,000

\$100,001 - \$1,000,000

Stock

NATURE OF INVESTMENT

IF APPLICABLE, LIST DATE:

► NAME OF BUSINESS ENTITY

**ACQUIRED** 

FAIR MARKET VALUE **\$2,000 - \$10,000** 

\$100,001 - \$1,000,000

Stock Stock

NATURE OF INVESTMENT

IF APPLICABLE, LIST DATE:

ACQUIRED

Other Partnership O Income Received of \$0 - \$499

Other . Partnership O Income Received of \$0 - \$499

GENERAL DESCRIPTION OF THIS BUSINESS

Partnership O Income Received of \$0 - \$499

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name

	nust be itemized. Charles Patrick Caspary
INESS ENTITY	e or financial statements.  NAME OF BUSINESS ENTITY
CRIPTION OF THIS BUSINESS  NO. CPUT COLS  VALUE  ,000 \$\$10,001 - \$100,000  1,000,000 \$\igcup \text{Over \$1,000,000}	GENERAL DESCRIPTION OF THIS BUSINESS  FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  Over \$1,000,000
VESTMENT  Other  (Describe)  Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)
LIST DATE:  0 / /20  DISPOSED	IF APPLICABLE, LIST DATE:  O(4) 21/20 / 20  ACQUIRED DISPOSED
VALUE (1,000,000) (1,000,000)	FAIR MARKET VALUE  \$\int \text{\$\frac{1}{2}} \
VESTMENT  Other  (Describe)  Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
LIST DATE: 0 03/8/20 DISPOSED	IF APPLICABLE, LIST DATE:
CRIPTION OF THIS BUSINESS  WALUE  000  \$\int_{000,000}\$\$10,001 - \$100,000  1,000,000  \int_{000,000}\$  Over \$1,000,000	NAME OF BUSINESS ENTITY    Vercury Seneral Condition   GENERAL DESCRIPTION OF THIS BUSINESS      Therefore
VESTMENT  Other  (Describe)  Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other  (Describe)  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)
LIST DATE:  D	IF APPLICABLE, LIST DATE:

### **SCHEDULE A-1**

#### Investments

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

Investments must be itemized.

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES	COMMISSION
Name	

Charles Patrick Caspary

Do not attach brokerag	e or financial statements.
FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000
NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: //20//20 ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE:  03/18/20//20  ACQUIRED DISPOSED
FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  NATURE OF INVESTMENT  Stock  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  NATURE OF INVESTMENT  Stock  Other  (Describe)  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: //20	IF APPLICABLE, LIST DATE:
RAME OF BUSINESS ENTITY  GENERAL DESCRIPTION OF THIS BUSINESS  FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT  Stock  Other  Describe  (Describe)  Partnership  Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	FAIR MARKET VALUE  \$2,000 - \$10,000
IF APPLICABLE, LIST DATE:          /	IF APPLICABLE, LIST DATE:  1.1

Comments: .

#### Stocks, Bonds, and Other Interests

(Ownershi)

NAME OF BUSINESS ENTITY

Comments: .

Inve Do not attach

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES	COMMISSION
Name	

p interes	t is Less Than 10%)   Charles Patrick Copper
	ust be itemized. Charles Patrick Caspary
brokerag	e or financial statements.
	Phillip Mons GENERAL DESCRIPTION OF THIS BUSINESS
<del></del>	FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  Over \$1,000,000
chedule C)	NATURE OF INVESTMENT  Stock Other  (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:
In es	GENERAL DESCRIPTION OF THIS BUSINESS  Sheel Fool & Beverages
chedule C)	FAIR MARKET VALUE \$2,000 - \$10,000
	IF APPLICABLE, LIST DATE:  23.26.20  ACQUIRED DISPOSED
<u>Der</u>	FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000
<del></del>	NATURE OF INVESTMENT  Stock Other

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

Investments must be itemized.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Charles Patrick Caspary

Do not attach brokerag	e or financial statements.
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
waste collection recycling	Bedjonids 1475
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,000 \$100,000 \$100,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ /20 OF O /20 ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
travel ventor tamment	marketing management probe
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT   ↑  National Control Co	NATURE OF INVESTMENT  ☑ Stock ☐ Other
(Describe)  Partnership O Income Received of \$0 - \$499	(Describe)  Partnership () Income Received of \$0 - \$499
○ Income Received of \$500 or More (Report on Schedule C)	☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
. / /20 Ø2 /20/20 ACQUIRED DISPOSED	12 /20 /20 /20 /20 /20 /20 /20 /20 /20 /2
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Royal Combean (nuse	Starbucks Comp GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000  NATURE OF INVESTMENT	\$100,001 - \$1,000,000
Stock Other (Describe)	Stock Other (Describe)
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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED
· · · · · · · · · · · · · · · · · · ·	

Comments: .

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

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Charles Patrick Caspary

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY  Union Pactic Corn
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$2,000 - \$10,000
NATURE OF INVESTMENT  Stock ☐ Other	NATURE OF INVESTMENT  Stock Other
(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	// <u>20</u>
NAME OF BUSINESS ENTITY  TOUR DOTA TO TOUR	NAME OF BUSINESS ENTITY  LA TED HEALTS. ALC COMMO
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Pagetha)	NATURE OF INVESTMENT  Stock Other (Secretary)
(Describe)  Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
67/15/20 / /20 ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
personal Care products	credit Cord services
FAIR MARKET VALUE  ☐ \$2,000 - \$10,000  \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000  NATURE OF INVESTMENT	S100,001 - \$1,000,000 Over \$1,000,000  NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	
Comments:	

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

Investments must be itemized.

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Charles Patrick Caspary

Do not attach protecting	o or imarioral otatomorito.
MAME OF BUSINESS ENTITY  Liste Management The  GENERAL DESCRIPTION OF THIS BUSINESS	► NAME OF BUSINESS ENTITY  GENERAL DESCRIPTION OF THIS BUSINESS ,
FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  Over \$1,000,000	FAIR MARKET VALUE  \$2,000 \$10,000  \$10,001 - \$100,000
NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499	\$100,001
○ Income Received of \$500 or More (Report on Schedule C)  IF APPLICABLE, LIST DATE:	O Income Received of \$500 or More (Report on Schedule C)  IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED
SENERAL DESCRIPTION OF THIS BUSINESS  COMORCE STORY  COMORCE STORY	MAME OF BUSINESS ENTITY  GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  Over \$1,000,000
NATURE OF INVESTMENT  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 (Describe)  Partnership O Income Received of \$0 - \$499  Uncome Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:  05.13/20 / 20  ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY  GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE  \$ \$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  Over \$1,000,000
NATURE OF INVESTMENT  Stock Other  (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	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:	IF APPLICABLE, LIST DATE:
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

**Charles Patrick Caspary** 

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
S-LI MKTADA	Cospary Family Trust
Ho Box 8635, Calabres 65, CA 91372 Address (Business Address Acceptable)	Name Po. Box 7625, Colonisto, CA 91372 Address (Business Address Acceptable)
Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	Check one  Check one  Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000  /	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000
NATURE OF INVESTMENT  ☐ Partnership ☐ Other  Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION TOUTER
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
S0 - \$499	□ \$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.)  X None or Names listed below	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Mames listed below
A Traines isted scient	Tony Walczuk UB Wholesale Roofing Inc
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST Check one box:	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:
☐ INVESTMENT 🔀 REAL PROPERTY	□ INVESTMENT   REAL PROPERTY   2779 - 018-034 , 2049-002-045
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of 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	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000
NATURE OF INTEREST  Property Ownership/Deed of Trust  Stock  Partnership	NATURE OF INTEREST  Property Ownership/Deed of Trust  Stock  Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments: \_

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION Name Charles Patrick Caspary

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
2779-018-004	2049-002-0295
Los Angeles	Hills
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000     \$10,001 - \$1,000,000     ACQUIRED   DISPOSED   Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   \$10,001 - \$1,000,000   ACQUIRED DISPOSED   Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	∑ Ownership/Deed of Trust ☐ Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 XI 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.  \[ \begin{align*} \text{None} \end{align*} \]  \[ \text{None} \text{No Fin Theorem } \]	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  None
	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
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)
% None	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST SALANCE DURING REPORTING PERIOD
\$500 - \$1,000   \$1,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
Comments:	<i>)</i>

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Charles Patrick Caspary

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
ADNAM LLC	Caspary Family Trist
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
Po Bos 8625, Calchouses, CA 91372 BUSINESS ACTIVITY, IF ANY, OF SOURCE	PO, DOXTIAS, COLONOSOS, (A 91372) BUSINESS ACTIVITY, IF ANY, OF SOURCE
cental property	rental property
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Partner	Trustee
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000\$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000	☐ \$10,001 - \$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 (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)  Loan repayment	(Real 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
(Describe)	JOIUNOISALE KOSIN, IONYIUAN ZUI
Other	Other
(Describe)	(Describe)
<ul> <li>(Describe)</li> <li>➤ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P</li> <li>* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the</li> </ul>	(Describe)  ERIOD  lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official statement.	(Describe)  ERIOD  lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official regular course of business must be disclosed as follows:  **The provided HTML Reporting Provid	lending institution, or any indebtedness created as part of see lender's regular course of business on terms available status. Personal loans and loans received not in a lender's second secon
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official regular course of business must be disclosed as follows:  **The provided HTML Reporting Provid	(Describe)  ERIOD  lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's status.  INTEREST RATE  None
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)	(Describe)  ERIOD  lending institution, or any indebtedness created as part of the lender's regular course of business on terms available estatus. Personal loans and loans received not in a lender's status.  INTEREST RATE  WERM (Months/Years)  SECURITY FOR LOAN
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official regular course of business must be disclosed as follows:  NAME OF LENDER*	(Describe)  ERIOD  lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's status.  INTEREST RATE  None
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)	CDescribe
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)	lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's status.  INTEREST RATE    None
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official regular course of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	CDescribe
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official 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	Coescribe
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official 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	lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's status. Interest rate    None
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official 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	Coescribe
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official 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 - \$10,000	Coescribe
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official 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 - \$10,000	Coescribe