

Stamp Date/Time Received:

COMPLAINT FORM

Complaint Number: 04-04

Please Type or Print in Ink and Complete Both Sides of this Form.

This complaint concerns a possible violation of: (please check all that apply)

- The Oakland Sunshine Ordinance, California Public Records Act or Brown Act (Access to public meetings or documents.)
- Oakland Campaign Reform Act
- Oakland City Council's Rules of Procedure/Code of Ethics
- Oakland Limited Public Financing Act
- Oakland Conflict of Interest regulations
- Oakland Lobbyist Registration Act
- Oakland False Endorsement In Campaign Literature Act
- I am/We are not sure which specific law, ordinance or regulations apply. However I am/We are requesting that the Ethics Commission determine if my/our complaint is within its jurisdiction.

27 JUL 16 P 3:55
PUBLIC ETHICS COMMISSION
OAKLAND

The alleged violation occurred on or about the following date(s):

FAILURE TO PROVIDE ECONOMIC INTEREST STATEMENT AS A MEMBER OF THE OAKLAND ARMY BASE REUSE AUTHORITY WHICH IS REQUIRED BY LAW.

The alleged violation occurred at the following place:

Please provide specific facts describing your complaint. (Or attach additional pages as necessary.)

Statement of Economic Interest is NOT AVAILABLE

Please provide specific facts describing your complaint. (If additional space is needed.)

Under the provisions that are set forth - Members of various boards and commissions are to provide a statement of Economic Interest - Phil Tagami has not provided such statement

The persons you allege to be responsible for the violation(s) are:

PHIL TAGAMI member of the ~~San~~ Oakland Army Base Reuse Authority

Any witnesses who were involved and/or who can provide additional information are: (Please indicate names and phone numbers, if available.)

PLEASE NOTE:

There may be other laws that apply to the violation(s) you are alleging. The time limit to commence a legal proceeding to enforce those laws may not be extended by filing this complaint. You should contact an attorney immediately to protect any rights available to you under the law.

By filing this complaint with the Public Ethics Commission it, and all other materials submitted with it, becomes a public record available for inspection and copying by the public.

NAME: <u>GENIE MARZANO</u>	PHONE NO. (Day) <u>(510) 893-6525</u>
ADDRESS: <u>282 ADAMS ST #6</u>	PHONE NO. (Eve) <u>(510) 893-0725</u>
CITY: <u>OAK</u> STATE: <u>CA</u> ZIP: <u>94616</u>	FAX NO. () _____
	E-MAIL _____

PLEASE RETURN THIS FORM TO:

Public Ethics Commission
One Frank Ogawa Plaza, 4th Floor
Oakland, CA 946121

Phone: (510) 238-3593
FAX: (510) 238-3315

ATTACHMENT 1

Item 02
Date 8-30-04
Page 5 of 18

Re: Simon Ed 12/8/03

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A Public Document

FILED Date Received
OFFICE OF THE CLERK
OAKLAND

04 JUN 15 PM 1:00

Please type or print in ink

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Tagami	Phillip	H.	(510) 268-8500
MAILING ADDRESS (May be business address)	STREET	CITY	ZIP CODE
300 Frank H. Ogawa Plz. #340, Oakland, CA			94612
			OPTIONAL: FAX / E-MAIL ADDRESS

1. Office, Agency or Court

Name:

City of Oakland

Division, Board, District, if applicable:

Oakland Base Reuse Authority

Position:

Mayors designee

- If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency:

Position:

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

- State
- County of _____
- City of _____
- Multi-County _____
- Other _____

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

Assuming Office/Initial Date: 7/29/03

Annual: The period covered is January 1, 2002, through December 31, 2002.

-or-

The period covered is _____ through December 31, 2002.

Leaving Office Date Left: _____ (Check one)

The period covered is January 1, 2002, through the date of leaving office.

-or-

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

Candidate

ATTACHMENT 2

4. Schedule Summary

(Check applicable schedules or "No reportable interests.")

During the reporting period, did you have any reportable interests to disclose on:

Schedule A-1 Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 Yes - schedule attached
Investments (10% or greater Ownership)

Schedule B Yes - schedule attached
Real Property

Schedule C Yes - schedule attached
Income & Business Positions (Income Other than Loans, Gifts, and Travel)

Schedule D Yes - schedule attached
Income - Loans

Schedule E Yes - schedule attached
Income - Gifts

Schedule F Yes - schedule attached
Income - Travel Payments

-or-

No reportable interests on any schedule

Total number of pages completed including this cover page: _____

5. Verification

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 7/29/03
(month, day, year)

Signature [Signature]
(File the originally signed statement with your filing official.)

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Date 8-30-04
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**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 COMMISSION
 Name _____

> NAME OF BUSINESS ENTITY
Scientific Learning Corp.
 GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____

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

NATURE OF INVESTMENT
 Stock
 Other _____ (Describe)

IF APPLICABLE, LIST DATE:
 _____ / _____ / 02 _____ / _____ / 02
 ACQUIRED DISPOSED

> NAME OF BUSINESS ENTITY

 GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____

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

NATURE OF INVESTMENT
 Stock
 Other _____ (Describe)

IF APPLICABLE, LIST DATE:
 _____ / _____ / 02 _____ / _____ / 02
 ACQUIRED DISPOSED

> NAME OF BUSINESS ENTITY

 GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____

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

NATURE OF INVESTMENT
 Stock
 Other _____ (Describe)

IF APPLICABLE, LIST DATE:
 _____ / _____ / 02 _____ / _____ / 02
 ACQUIRED DISPOSED

> NAME OF BUSINESS ENTITY

 GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____

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

NATURE OF INVESTMENT
 Stock
 Other _____ (Describe)

IF APPLICABLE, LIST DATE:
 _____ / _____ / 02 _____ / _____ / 02
 ACQUIRED DISPOSED

> NAME OF BUSINESS ENTITY

 GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____

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

NATURE OF INVESTMENT
 Stock
 Other _____ (Describe)

IF APPLICABLE, LIST DATE:
 _____ / _____ / 02 _____ / _____ / 02
 ACQUIRED DISPOSED

> NAME OF BUSINESS ENTITY

 GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____

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

NATURE OF INVESTMENT
 Stock
 Other _____ (Describe)

IF APPLICABLE, LIST DATE:
 _____ / _____ / 02 _____ / _____ / 02
 ACQUIRED DISPOSED

ATTACHMENT 2

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 Date 8-30-04
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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 _____

1. BUSINESS ENTITY OR TRUST

Name Uptown Broadway Partners
Address 300 Frank H. Ogawa Plz #340, Oakland

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 _____/_____/02 _____/_____/02

\$10,001 - \$100,000 _____/_____/02 _____/_____/02

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

Over \$1,000,000

NATURE OF INVESTMENT

Sole Proprietorship Partnership _____ 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/LOANS OF \$10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
1933 Broadway, Oakland

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 _____/_____/02 _____/_____/02

\$10,001 - \$100,000 _____/_____/02 _____/_____/02

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

Over \$1,000,000

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

ATTACHMENT 2

1. BUSINESS ENTITY OR TRUST

Name Uptown Broadway Partners cont.
Address _____

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 _____/_____/02 _____/_____/02

\$10,001 - \$100,000 _____/_____/02 _____/_____/02

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

Over \$1,000,000

NATURE OF INVESTMENT

Sole Proprietorship Partnership _____ 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/LOANS OF \$10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
1920 Telegraph, Oakland

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 _____/_____/02 _____/_____/02

\$10,001 - \$100,000 _____/_____/02 _____/_____/02

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

Over \$1,000,000

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

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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 _____

> 1. BUSINESS ENTITY OR TRUST

T.D. Partners
Name
300 Frank H. Ogawa Plz #340
Address
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 _____/_____/02

\$10,001 - \$100,000 3/15/03 _____/_____/02

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

Over \$1,000,000

NATURE OF INVESTMENT

Sole Proprietorship Partnership _____ 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/LOANS OF \$10,000 OR MORE (attach a separate sheet if necessary)

> 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

4281 Technology Drive, Fremont
Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 _____/_____/02

\$10,001 - \$100,000 _____/_____/02

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

Over \$1,000,000

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

ATTACHMENT 2

> 1. BUSINESS ENTITY OR TRUST

Name

Address
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 _____/_____/02

\$10,001 - \$100,000 _____/_____/02

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

Over \$1,000,000

NATURE OF INVESTMENT

Sole Proprietorship Partnership _____ 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/LOANS OF \$10,000 OR MORE (attach a separate sheet if necessary)

> 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 _____/_____/02

\$10,001 - \$100,000 _____/_____/02

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

Over \$1,000,000

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

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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 _____

1. BUSINESS ENTITY OR TRUST

Name Rolunda Partners II
 Address 300 Frank H. Ogawa Plz #340, Oakland
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Building Operation

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

ACQUIRED _____ DISPOSED _____

NATURE OF INVESTMENT
 Sole Proprietorship Partnership 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/LOANS OF \$10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity or 300 Frank H. Ogawa Plz., #340, Oakland
 Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or City or Other Precise Location of Real Property _____

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

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

ATTACHMENT 2

1. BUSINESS ENTITY OR TRUST

Name 411 Medical Group
 Address 300 Frank H. Ogawa Plz. #340, Oakland
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

ACQUIRED _____ DISPOSED _____

NATURE OF INVESTMENT
 Sole Proprietorship Partnership 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/LOANS OF \$10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity or 11600 Broadway, Oakland
 Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or City or Other Precise Location of Real Property _____

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

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

Date 8-30-04
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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 _____

1. BUSINESS ENTITY OR TRUST

Name California Capital Group
 Address 300 Frank H. Ogawa Plz. #340, Oakland

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Real Estate Consulting + Development

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/02 _____/_____/02
 \$10,001 - \$100,000 _____/_____/02 _____/_____/02
 \$100,001 - \$1,000,000 _____/_____/02 _____/_____/02
 Over \$1,000,000 _____/_____/02 _____/_____/02

NATURE OF INVESTMENT
 Sole Proprietorship Partnership _____ Other

YOUR BUSINESS POSITION Managing General Partner

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/LOANS OF \$10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

1733 Broadway
 Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Oakland
 Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/02 _____/_____/02
 \$10,001 - \$100,000 _____/_____/02 _____/_____/02
 \$100,001 - \$1,000,000 _____/_____/02 _____/_____/02
 Over \$1,000,000 _____/_____/02 _____/_____/02

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

ATTACHMENT 2

1. BUSINESS ENTITY OR TRUST

Name California Capital Group cont.
 Address _____

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/02 _____/_____/02
 \$10,001 - \$100,000 _____/_____/02 _____/_____/02
 \$100,001 - \$1,000,000 _____/_____/02 _____/_____/02
 Over \$1,000,000 _____/_____/02 _____/_____/02

NATURE OF INVESTMENT
 Sole Proprietorship Partnership _____ 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/LOANS OF \$10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

1921 Broadway
 Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Oakland
 Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/02 _____/_____/02
 \$10,001 - \$100,000 _____/_____/02 _____/_____/02
 \$100,001 - \$1,000,000 _____/_____/02 _____/_____/02
 Over \$1,000,000 _____/_____/02 _____/_____/02

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

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SCHEDULE D
Income - Loans
 (Received or Outstanding)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____

> NAME OF LENDER
California Capital Group
 ADDRESS
300 Frank Ogawa Plaza
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 10 % None TERM (Months/Years) 48

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor Bistro Burges
 Other _____
(Describe)

> NAME OF LENDER
California Capital Group
 ADDRESS
300 Frank Ogawa Plaza
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 10 % None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor Larond Gray
 Other _____
(Describe)

> NAME OF LENDER
California Capital Group
 ADDRESS
300 Frank Ogawa Plaza
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 9 % None TERM (Months/Years) 36

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property 510 17th Street
Street address

Oakland
City
 Guarantor SPACE, 510 17th St.
 Other _____
(Describe)

> NAME OF LENDER

 ADDRESS

 BUSINESS ACTIVITY OF LENDER

INTEREST RATE _____ % None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor _____
 Other _____
(Describe)

ATTACHMENT 2

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Comments: _____

SCHEDULE D
Income - Loans
 (Received or Outstanding)

Name _____

> NAME OF LENDER
1st Nationwide Bank
 ADDRESS _____
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 5.75 % None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property 300 Frank Ogawa Plaza
Street address
Oakland
City

Guarantor Phillip Tazami
 Other Mark Moss + Len Epstein
(Describe)

> NAME OF LENDER
United Commercial Bank
 ADDRESS _____
800 Webster St, Oakland
 BUSINESS ACTIVITY OF LENDER
Bank

INTEREST RATE _____ % None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property 1733 Broadway
Street address
Oakland
City

Guarantor Len Epstein + Phil Tazami
 Other _____
(Describe)

> NAME OF LENDER
City of Oakland
 ADDRESS _____
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 0 % None TERM (Months/Years) 20 years

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property 300 Frank Ogawa Plz.
Street address
Oakland
City

Guarantor Phillip Tazami
 Other Mark Moss + Len Epstein
(Describe)

> NAME OF LENDER
United Commercial Bank
 ADDRESS _____
800 Webster, Oakland
 BUSINESS ACTIVITY OF LENDER
Bank

INTEREST RATE 8 % None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property 1921 Broadway
Street address
Oakland
City

Guarantor _____
 Other _____
(Describe)

ATTACHMENT 2

Item D-2

Date 8-30-04

Page 16 of 18

Comments: _____

SCHEDULE D
Income – Loans
 (Received or Outstanding)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
 Name _____

> NAME OF LENDER
CCG
 ADDRESS
300 Frank Ogawa Plz
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 10 % None TERM (Months/Years) 60

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City

Guarantor Friends of Creation Spirituality
 Other _____
(Describe)

> NAME OF LENDER
CCG
 ADDRESS
300 Frank H. Ogawa Plz # 340
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 10 % None TERM (Months/Years) 24

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City

Guarantor Lighthouse Community Charter School
 Other _____
(Describe)

> NAME OF LENDER
CCG
 ADDRESS
300 Frank Ogawa Plz
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 10 % None TERM (Months/Years) 36

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City

Guarantor Mark Rollins
 Other _____
(Describe)

> NAME OF LENDER

 ADDRESS

 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE _____ % None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City

Guarantor Item D-2
 Other Date 8-30-04
(Describe)

ATTACHMENT 2

Comments: _____

SCHEDULE D
Income - Loans
 (Received or Outstanding)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
 Name _____

> NAME OF LENDER
Sharon Goods
 ADDRESS _____
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 8 % None TERM (Months/Years) 36

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City

Guarantor CCG
 Other _____
(Describe)

> NAME OF LENDER
Laurie Cooperman
 ADDRESS _____
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 8 % None TERM (Months/Years) 48

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City

Guarantor CCG
 Other _____
(Describe)

> NAME OF LENDER
Denise Gross
 ADDRESS _____
81 Lansing St, Suite 206, SE
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 7 % None TERM (Months/Years) 36

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City

Guarantor CCG
 Other _____
(Describe)

> NAME OF LENDER
Sean Marks
 ADDRESS _____
 BUSINESS ACTIVITY OF LENDER _____

INTEREST RATE 9 % None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City

Guarantor CCG Item D-2
 Other _____ Date 8-30-04
(Describe)

ATTACHMENT 2

Comments: _____