

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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DISTRICT SECRETARY'S
OFFICE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
STANDRIDGE DENISE CHRISTINE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

ALAMEDA-CONTRA COSTA TRANSIT DISTRICT

Division, Board, Department, District, if applicable

Your Position

GENERAL COUNSEL

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

Agency: _____

Position: _____

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County Portions of Alameda and Contra Costa

County of _____

City of _____

Other _____

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

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

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

-or-

The period covered is ____/____/____, through December 31, 2015.

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

-or-

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

Assuming Office: Date assumed ____/____/____

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

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

Schedules attached

Schedule A-1 - Investments - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

Schedule D - Income - Gifts - schedule attached

Schedule B - Real Property - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE

(Business or Agency Address Recommended - Public Document)

1600 Franklin Street

Oakland

CA

94612

DAYTIME TELEPHONE NUMBER

(510) 891-4833

E-MAIL ADDRESS

dstandri@actransit.org

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.

Date Signed 3/7/16
(month, day, year)

Signature Denise E. Standridge
(File the originally signed statement with your filing official.)