STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER (LAST) (FIRST) (MIDDLE)
ORTIZ ELSA

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
ALAMEDA-CONTRA COSTA TRANSIT DISTRICT
Division, Board, Department, District, if applicable
BOARD OF DIRECTORS
Your Position
DIRECTOR-WARD 3

Agency: BRT POLICY STEERING COMMITTEE
Position: COMMITTEE CHAIR

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

☐ State
☑ Multi-County Portions of Alameda & Contra Costa
☐ County of
☐ Other

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

☑ Annual: The period covered is January 1, 2013, through December 31, 2015.
☐ Leaving Office: Date Left / / (Check one)
☐ The period covered is January 1, 2015, through the date of leaving office.
☐ 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: 2

Schedules attached

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

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
1600 FRANKLIN STREET
OAKLAND CA 94612

STREET CITY STATE ZIP CODE

DAYTIME TELEPHONE NUMBER (510) 891-7211

E-MAIL ADDRESS eortiz@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 5/9/16 (month, day, year)
Signature

California Form 700 (2015/2016)
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
**SCHEDULE B**

**Interests in Real Property**
(Including Rental Income)

| ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS |  |
|-------------------------------------------|--
| 712 SANTA RAY AVENUE                     |  |
| CITY                                      | OAKLAND, CA 93619 |

| FAIR MARKET VALUE | IF APPLICABLE, LIST DATE: |  |
|-------------------|--------------------------|--
| $2,000 - $10,000  | $10,001 - $100,000       |  |
| $100,001 - $1,000,000 | / / 14            | ACQUIRED |
| Over $1,000,000  | / / 14                  | DISPOSED |

| NATURE OF INTEREST |  |
|-------------------|--
| Ownership/Deed of Trust | ☑ |
| Easement           | ☐ |

| Leasehold | Yrs. remaining | Other |  |

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

| $0 - $499   | $500 - $1,000 | $1,001 - $10,000 | OVER $100,000 |  |

**SOURCES OF RENTAL INCOME:** If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

| ☐ None |  |

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* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

| NAME OF LENDER* |  |
|-----------------|--
|  |  |

| ADDRESS (Business Address Acceptable) |  |
|---------------------------------------|--
|  |  |

| BUSINESS ACTIVITY, IF ANY, OF LENDER |  |
|--------------------------------------|--
|  |  |

| INTEREST RATE | TERM (Month/years) |  |
|--------------|--------------------|--
| %            | ☐ None             |  |

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

| ☐ Guarantor, if applicable |  |

**NAME OF LENDER***

| ADDRESS (Business Address Acceptable) |  |
|---------------------------------------|--
|  |  |

| BUSINESS ACTIVITY, IF ANY, OF LENDER |  |
|--------------------------------------|--
|  |  |

| INTEREST RATE | TERM (Month/years) |  |
|--------------|--------------------|--
| %            | ☐ None             |  |

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

| ☐ Guarantor, if applicable |  |

**Comments:**

FFPC Form 700 (2014/2015) Sch. B
FFPC Advice Email: advice@ffpc.ca.gov
FFPC Toll-Free Helpline: 866/275-3772 www.ffpc.ca.gov
SCHEDULE D
Intereets in Real Property
(Including Rental Income)

ASSessor'S PARCEL NUMBER OR STREET ADDRESS
712 SANTA RAY AVENUE

CITY
OAKLAND, CA 93619

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

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

NATURE OF INTEREST
☑ Ownership/Deed of Trust
☐ Easement
☐ Leasehold
☐ Yes, remaining
☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
☐ None

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows.

NAME OF LENDER:

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE ☐ 14% ☐ None

TERM (Month/Year)

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000
☐ Guarantor, if applicable

Filer's Verification

Print Name ELSA ORTIZ
Office, Agency or Court AC Transit Board of Directors
Statement Type ☑ 2015/2016 Annual ☐ Assuming ☐ Leaving
☐ (W) Annual ☐ Candidate

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 03/25/2016

Filer's Signature

Comments:

FPPC Form 700 (2015/2016) Sch. B
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov