

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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 DISTRICT SECRETARY'S
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NAME OF FILER (LAST) (FIRST) (MIDDLE)
 PEEPLES, H. E. Christian

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
 At-Large Director

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

Agency: See Attachment 1 Position:

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

- State
- Multi-County Parts of Alameda and Contra Costa
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual: The period covered is January 1, 2014, through December 31, 2014.
- or-
- The period covered is _____, through December 31, 2014.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2014, through the date of leaving office.
- The period covered is _____, through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

- Check applicable schedules or "None." Total number of pages including this cover page: 5
- 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
 - 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, 10th Floor Oakland CA 946122800
 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
 (510) 891-7284 cpeeples@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 03/31/2015
 (month, day, year)

Signature H. E. Christian Peoples
 (File the originally signed statement with your filing official.)

ATTACHMENT 1

1. *List of other jurisdictions:*

Alameda County Transportation Commission	Alternate Board Member
City of Alameda Successor Agency Oversight Committee	Alternate Board Member
City of Albany Successor Agency Oversight Committee	Board Member
Contra Costa Transportation Authority	Ex-Officio Board Member
City of Oakland Successor Agency Oversight Committee	Alternate Board Member
Transbay Terminal Joint Powers Authority	Alternate Board Member
Western Contra Costa Transportation Advisory Committee	Alternate Board Member

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name

PEEPLES, H. E. Christian

Form section for Raychem investment, including fields for Name of Business Entity, General Description, Fair Market Value, Nature of Investment, and List Date.

Form section for an unnamed investment, including fields for Name of Business Entity, General Description, Fair Market Value, Nature of Investment, and List Date.

Form section for International Flavors & Fragrances, Inc. investment, including fields for Name of Business Entity, General Description, Fair Market Value, Nature of Investment, and List Date.

Form section for an unnamed investment, including fields for Name of Business Entity, General Description, Fair Market Value, Nature of Investment, and List Date.

Form section for International Business Machines investment, including fields for Name of Business Entity, General Description, Fair Market Value, Nature of Investment, and List Date.

Form section for an unnamed investment, including fields for Name of Business Entity, General Description, Fair Market Value, Nature of Investment, and List Date.

Comments:

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name PEEPLES, H. E. Christian

▶ NAME OF SOURCE *(Not an Acronym)*
Northern California Carpenters Regional Council

ADDRESS *(Business Address Acceptable)*
265 Hagenburger Road, #200, Oakland CA 94621

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Labor Orgnazation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 12 / 14	\$ 50.00	Moose Feed Lunch
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: _____