1. Office, Agency, or Court
Agency Name  (Do not use acronyms)
Alameda-Contra Costa Transit District
Division, Board, Department, District, if applicable Your Position
Board of Directors Board of Directors
► 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, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ County of ___________________________
☐ Multi-County Portions of Alameda & Contra Costa
☐ Other ___________________________

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2019, through December 31, 2019.
☐ Leaving Office: Date Left ______/_____/______
☐ The period covered is ______/_____/______, through December 31, 2019.
☐ The period covered is ______/_____/______, through December 31, 2019.
☐ Assuming Office: Date assumed ______/_____/______
☐ Other ___________________________
☐ Date of Election __________________ and office sought, if different than Part 1: __________________

4. Schedule Summary (must complete)  ► Total number of pages including this cover page: 3
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 STREET CITY STATE ZIP CODE
(205) 891-4700
1600 Franklin Street Oakland CA 94612
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
jwalsh@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 12/28/2020 11:01 AM Signature Electronic Submission
(month, day, year) (File the originally signed paper statement with your filing official)
SCHEDULE B
Interests in Real Property
(Including Rental Income)

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

4413-5 West Street

CITY

Oakland

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

- Ownership/Deed of Trust
- Easement
- Leasehold

Years 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
- Jacon Surpin

* You are not required to report loans from a commercial lending institution 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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
</tr>
</tbody>
</table>

INTEREST RATE TERM (Months/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:
**SCHEDULE C**

Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

**NAME OF SOURCE OF INCOME**

**SFERS**

ADDRESS (Business Address Acceptable)

1145 Market St, 5th Fl

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

Retired

GROSS INCOME RECEIVED

- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [x] $10,001 - $100,000
- [ ] OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- [x] 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.)
- [ ] Sale of
  (Real property, car, boat, etc.)
- [ ] Loan repayment
- [ ] Commission or
  Rental Income, list each source of $10,000 or more

Other
  (Describe)

**1. INCOME RECEIVED**

**NAME OF SOURCE OF INCOME**

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [x] OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- [ ] 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.)
- [ ] Sale of
  (Real property, car, boat, etc.)
- [ ] Loan repayment
- [ ] Commission or
  Rental Income, list each source of $10,000 or more

Other
  (Describe)

**2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, 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

HIGHEST BALANCE DURING REPORTING PERIOD

- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000

INTEREST RATE

- [ ] %
- [ ] None

TERM (Months/Years)

SECURITY FOR LOAN

- [ ] None
- [ ] Personal residence
- [ ] Real Property
  Street address
  City
- [ ] Guarantor

Other
  (Describe)

Comments:
STATEMENT OF ECONOMIC INTERESTS

COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) Walsh
(FIRST) Jean

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Alameda-Contra Costa Transit District
Division, Board, Department, District, if applicable
Bus Rapid Transit Policy Steering Committee
Your Position
Members of the Bus Rapid Transit Policy Steering Committee

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, Retired Judge, Pro Temp Judge, or Court Commissioner (Statewide Jurisdiction)
☐ Multi-County Alameda-Contra Costa Transit District
☐ County of
☐ City of
☐ Other

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

☐ Annual: The period covered is January 1, 2019, through December 31, 2019.
- or -
The period covered is ______/_____/_______, through December 31, 2019.
☐ Leaving Office: Date Left ______/_____/_______ (Check one circle.)
- or -
The period covered is January 1, 2019, through the date of leaving office.
- or -
The period covered is ______/_____/_______ through the date of leaving office.
☐ Assuming Office: Date assumed ______/_____/_______

☐ 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: 3

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
(If Business or Agency Address Recommended - Public Document)

CITY
STATE
ZIP CODE

DAYTIME TELEPHONE NUMBER
(510) 891-4700

EMAIL ADDRESS
jwalsh@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 01/02/2021 03:49 PM

(month, day, year)

Signature

(Fire the originally signed paper statement with your filing official.)
SCHEDULE B
Interests in Real Property
(Including Rental Income)

ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS
4413-5 West Street

CITY
Oakland

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

IF APPLICABLE, LIST DATE:

☐ / / / - / / / ACQUIRED
☐ / / / - / / / DISPOSED

NATURE OF INTEREST
☐ Ownership/Deed of Trust
☐ Easement
☐ Leasehold
☐ Other

Yrs. remaining

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

Jacon Surpin

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Jean Walsh

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NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/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 (Months/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:
### SCHEDULE C
**Income, Loans, & Business Positions**
(Other than Gifts and Travel Payments)

#### 1. INCOME RECEIVED

**NAME OF SOURCE OF INCOME**

**SFERS**

**ADDRESS** *(Business Address Acceptable)*

1145 Market St, 5th Fl

**BUSINESS ACTIVITY, IF ANY, OF SOURCE**

**YOUR BUSINESS POSITION**

Retired

**GROSS INCOME RECEIVED**

- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**

- Salary
- Spouse’s or registered domestic partner’s income
- Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- Sale of ____________________________
  *(Real property, car, boat, etc.)*
- Loan repayment
- Commission or Rental Income, list each source of $10,000 or more
- Other ____________________________ *(Describe)*

#### 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

*You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, 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:*

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
<th>INTEREST RATE</th>
<th>TERM (Months/Years)</th>
<th>SECURITY FOR LOAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>%</td>
<td></td>
<td>None</td>
</tr>
</tbody>
</table>

**ADDRESS** *(Business Address Acceptable)*

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

**Comments:**

FPPC Form 700 - Schedule C (2019/2020)

advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov