NAME OF FILER  (LAST)  (FIRST)  (MIDDLE)
Shaw  Diane

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

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 (Statewide Jurisdiction)
☐ Multi-County  Portions of Alameda & Contra Costa
☐ County of ____________________________
☐ City of ____________________________
☐ Other ____________________________

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

☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
- or - The period covered is ______/_____/________ through December 31, 2020.
☐ Leaving Office: Date Left _____/_____/________
(Check one circle.)
- or - The period covered is January 1, 2020, 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: 1

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
- 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  EMAIL ADDRESS
(510) 891-4700  dshaw@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  02/18/2021 02:33 PM  Signature  Electronic Submission
(month, day, year)  (File the originally signed paper statement with your filing official.)