

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

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Please type or print	in ink.						
NAME OF FILER (LAST) (FIRST)			(MIDDLI	(MIDDLE)			
Walsh	Jean						
1. Office, Agenc	y, or Court						
Agency Name (De	o not use acronyms)						
,	ntra Costa Transit District						
	epartment, District, if applicable		Your Position				
Board of Direct			Board of Directors				
	iple positions, list below or on an attachmer	nt (Do not use acron					
F it limiting for illust	יאים איסטונוטווס, ווסג שפוטיש טו טוז מוז מננמטוווופו	וו. וטט ווטג עטט מטוטוו	ymoj				
Agency:			Position:				
2. Jurisdiction	of Office (Check at least one box)						
State	ŕ	☐ Judge, Retired Jud (Statewide Jurisdict		ge, Pro Tem Judge, or Court Commissioner iion)			
Multi-County ✓	Portions of Alameda & Contra Co	sta [County of				
☐ City of			٦				
3. Type of State	ement (Check at least one box)		_				
Dec	period covered is January 1, 2022, through tember 31, 2022 .	n [Leaving Office: Date Left (Check	k one circle.)			
	period covered is/	, through	The period covered is Jaleaving office.	anuary 1, 2022, through the date of			
Assuming Of	ffice: Date assumed//		The period covered is the date of leaving office				
Candidate:	Date of Election and	d office sought, if differ	rent than Part 1:				
4. Schedule Su	mmary (required) ► To	tal number of pa	ges including this cover	r page: 3			
Schedules a		,	•				
Schedule	A-1 - Investments – schedule attached	┌ Sche	dule C - Income, Loans, & Bus	siness Positions – schedule attached			
Schedule A-2 - Investments – schedule attached Schedule D - Income – Gifts				edule attached			
× Schedule	Cabadula F. Jacoma Ciffa Traval Payments askedula ettected						
	No reportable interests on any sch	edule					
5. Verification							
MAILING ADDRESS (Business or Agency A	STREET ddress Recommended - Public Document)	CITY	STATE	ZIP CODE			
1600 Franklin	,	Oakland	CA	94612			
DAYTIME TELEPHONI	E NUMBER	EMAIL A	ADDRESS				
(510)891-	4700	jwals	sh@actransit.org				
	asonable diligence in preparing this statemen attached schedules is true and complete.			ny knowledge the information contained			
I certify under pe	enalty of perjury under the laws of the St	tate of California that	the foregoing is true and co	rrect.			
Data Signad	03/12/2023 07:55 PM	Clauston	a la	an Walsh			
Date Signed	(month, day, year)	Signatur	*	per statement with your filing official.)			

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION Name Jean Walsh

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 4413-5 West Street	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
CITY	CITY
Oakland FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED
Max Walters	
You are not required to report loans from a commerci	ial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:
You are not required to report loans from a commerci business on terms available to members of the public	c without regard to your official status. Personal loans and
You are not required to report loans from a commerci business on terms available to members of the public loans received not in a lender's regular course of bus	c without regard to your official status. Personal loans and siness must be disclosed as follows:
You are not required to report loans from a commerce business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER*	c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER*
You are not required to report loans from a commerce business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
You are not required to report loans from a commerce business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER

SCHEDULE D Income - Gifts

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION

Name

Jean Walsh

► NAME OF SOURC	CE (Not an Acron	nym)	► NAME OF SOURC	E (Not an Acro	onym)
Steve Palmer					
ADDRESS (Business Address Acceptable)			ADDRESS (Business Address Acceptable)		
800 Maine Av	e, Washingt	ton DC 20024			
BUSINESS ACTIVI	ITY, IF ANY, OF	SOURCE	BUSINESS ACTIVI	TY, IF ANY, O	F SOURCE
Van Scoyoc A	Associates				
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 15 / 22	\$ <u>73</u>	Dinner		\$	
	\$	_		\$	
/	\$	_		\$	_
NAME OF SOURC	CE (Not an Acron	nym)	► NAME OF SOURC	E (Not an Acro	onym)
ADDRESS (Business Address Acceptable)			ADDRESS (Business Address Acceptable)		
BUSINESS ACTIVI	ITY, IF ANY, OF	SOURCE	BUSINESS ACTIVI	TY, IF ANY, O	F SOURCE
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
//	\$	_		\$	_
/	\$	_		\$	_
	\$	_		\$	_
NAME OF SOURC	CE (Not an Acron	nym)	► NAME OF SOURC	E (Not an Acro	onym)
ADDRESS (Busines	ss Address Acce	ptable)	ADDRESS (Busines	ss Address Acc	reptable)
BUSINESS ACTIVI	ITY, IF ANY, OF	SOURCE	BUSINESS ACTIVI	TY, IF ANY, O	F SOURCE
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/	\$	_		\$	
/	\$	_		\$	_
/	\$			\$	
Comments:					