Leaving Office:

Date Left /

(Check one circle.)

The period covered is January 1, 2019, through the date of leaving office.

The period covered is __/__/____, through the date of leaving office.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Monterey Bay Area Governments

Division, Board, Department, District, if applicable

Your Position

Alternate Board of Directors

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

Agency: SEE ATTACHED LIST

Position: ______________________

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

[ ] State

[ ] Judge, Retired Judge, Pro Tem Judge, or Court Commissioner

(Statewide Jurisdiction)

[ ] Multi-County Monterey, San Benito, Santa Cruz

[ ] 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: 5

Schedules attached

[ ] Schedule A-1 - Investments – schedule attached

[ ] Schedule A-2 - Investments – schedule attached

T X 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

(Business or Agency Address Recommended - Public Document)

1 Civic Center Dr

Scotts Valley CA 95066-4197

STREET

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER

( 831 ) 566-3180

EMAIL ADDRESS

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 01/06/2020 10:42 PM Signature ______________________

(month, day, year) (File the originally signed paper statement with your filing official.)

Electronic Submission
### STATEMENT OF ECONOMIC INTERESTS

#### COVER PAGE ATTACHMENT

**CALIFORNIA FORM 700**

**FAIR POLITICAL PRACTICES COMMISSION**

<table>
<thead>
<tr>
<th>Name</th>
<th>Jack Dilles</th>
</tr>
</thead>
</table>

**EXPANDED STATEMENT LIST**

<table>
<thead>
<tr>
<th>Agency Name</th>
<th>Division, Board, Department, District</th>
<th>Position or Title</th>
<th>Jurisdiction</th>
<th>Type of Statement</th>
<th>Period Covered</th>
</tr>
</thead>
<tbody>
<tr>
<td>City of Scotts Valley</td>
<td></td>
<td>City Council Member</td>
<td>City of Scotts Valley</td>
<td>Annual</td>
<td>01/01/19 - 12/31/19</td>
</tr>
<tr>
<td>Monterey Bay Community Power Joint Powers Authority</td>
<td></td>
<td>Member, Policy Board of Directors</td>
<td>Multi-county Santa Cruz, Monterey, and San Benito</td>
<td>Annual</td>
<td>01/22/19 - 12/31/19</td>
</tr>
</tbody>
</table>
### 1. BUSINESS ENTITY OR TRUST

**Dilles Government Finance Consulting (aka Dilles Finance Consulting)**

**Name:**

P O Box 66123, Scotts Valley, CA 95067

**Address (Business Address Acceptable):**

Check one:
- [ ] Trust, go to 2
- [ ] Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

**financial & administrative consulting**

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $1,999</td>
<td>/ / 19 ACQUIRED / / 19 DISPOSED</td>
</tr>
<tr>
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<td></td>
</tr>
<tr>
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<td></td>
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<td>$100,001 - $1,000,000</td>
<td></td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
</tr>
</tbody>
</table>

**NATURE OF INVESTMENT**

| Partnership | [ ] Sole Proprietorship | [ ] Other |

**YOUR BUSINESS POSITION**

owner

### 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

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

### 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE

- None or [ ] Names listed below
- Management Advisory Services
- Municipal Resources Group LLC
- Lathrop-Manteca Fire Protection District

### 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
- [ ] INVESTMENT
- [ ] REAL PROPERTY

**Name of Business Entity, if Investment, or Assessor’s Parcel Number or Street Address of Real Property**

**Description of Business Activity or City or Other Precise Location of Real Property**

<table>
<thead>
<tr>
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<td></td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
</tr>
</tbody>
</table>

**NATURE OF INTEREST**

- Property Ownership/Deed of Trust
- Stock
- Partnership

- Leasehold
- Other

**Yrs. remaining**

**Check box if additional schedules reporting investments or real property are attached**
## SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

### 1. BUSINESS ENTITY OR TRUST

**John and Lisa Dilles Family Trust**

Name
P O Box 66123, Scotts Valley, CA 95067

Address (Business Address Acceptable)

Check one:
- ☐ Trust, go to 2
- ☑ Business Entity, complete the box, then go to 2

### GENERAL DESCRIPTION OF THIS BUSINESS

<table>
<thead>
<tr>
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</thead>
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<tr>
<td>$0 - $1,999</td>
<td>1/1/19 Acquired</td>
</tr>
<tr>
<td>$2,000 - $10,000</td>
<td>1/1/19 Disposed</td>
</tr>
<tr>
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<tr>
<td>Over $1,000,000</td>
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</table>

<table>
<thead>
<tr>
<th>NATURE OF INVESTMENT</th>
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</thead>
<tbody>
<tr>
<td>Partnership</td>
</tr>
<tr>
<td>Sole Proprietorship</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

YOUR BUSINESS POSITION

### 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☒ $0 - $499 $10,001 - $100,000
- ☐ $50 - $1,000 OVER $100,000
- ☐ $1,001 - $10,000

### 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

<table>
<thead>
<tr>
<th>Name listed below</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nick Dilles &amp; Pearl Kan</td>
</tr>
</tbody>
</table>

### 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
- ☐ INVESTMENT
- ☑ REAL PROPERTY

123 Peyton Street, Santa Cruz, CA 95060

Name of Business Entity, if Investment, or Assessor’s Parcel Number or Street Address of Real Property

Residential Rental

Description of Business Activity or City or Other Precise Location of Real Property

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<tr>
<td>Leasehold Yrs. remaining</td>
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<tr>
<td>Other</td>
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</table>

Comments:

---

**John Leslie Dilles**

Name
P O Box 66123, Scotts Valley, CA 95067

Address (Business Address Acceptable)

Check one:
- ☐ Trust, go to 2
- ☑ Business Entity, complete the box, then go to 2

### GENERAL DESCRIPTION OF THIS BUSINESS

Real Estate Brokerage

### FAIR MARKET VALUE

- ☒ $0 - $1,999 $2,000 - $10,000
- ☐ $10,001 - $100,000
- ☐ $100,001 - $1,000,000
- ☐ Over $1,000,000

### NATURE OF INVESTMENT

- Partnership
- ☑ Sole Proprietorship
- Other

YOUR BUSINESS POSITION

Broker/Owner

### 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☒ $0 - $499 $10,001 - $100,000
- ☐ $50 - $1,000 OVER $100,000
- ☐ $1,001 - $10,000

### 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

- Names listed below

### 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
- ☐ INVESTMENT
- ☑ REAL PROPERTY

Name of Business Entity, if Investment, or Assessor’s Parcel Number or Street Address of Real Property

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</table>

Comments:
**NAME OF LENDER**

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

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

**INTEREST RATE**

**TERM** *(Months/Years)*

**HIGHEST BALANCE DURING REPORTING PERIOD**

**Guarantor, if applicable**

**SOUSCRIPTIONS 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**

### Schedule B

**INTERESTS IN REAL PROPERTY** *(Including Rental Income)*

**ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS**

123 Peyton Street

**CITY**

Santa Cruz

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**IF APPLICABLE, LIST DATE:**

- / / 19
- / / 19

**NATURE OF INTEREST**

- Leasehold

**Yrs. remaining**

- Other

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

- $0 - $499
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $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

**Nick Dilles & Pearl Kan**

*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:*