STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Johnson Randy L

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Scotts Valley
Division, Board, Department, District, if applicable
Your Position
City Council Member

► 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
☐ Multi-County
☒ City of Scotts Valley
☐ 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, 2016, through December 31, 2016.
- or -
The period covered is ______/_____/______, through December 31, 2016.

☐ Assuming Office: Date assumed ______/_____/______

☐ Candidate: Election year ______ and office sought, if different than Part 1:

☐ Leaving Office: Date Left ______/_____/______
(Click one)
- or -
The period covered is ______/_____/______, through the date of leaving office.

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 of Agency Address Recommended - Public Document
1 Civic Center Dr Scotts Valley CA 95066-4197

DAYTIME TELEPHONE NUMBER
( 831 ) 438-0633

E-MAIL ADDRESS
rlj12@comcast.net

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 03/31/2017 11:34 AM Signature Electronic Submission

(Fill the originally signed statement with your filing official)
## SCHEDULE B
Interests in Real Property
(Including Rental Income)

### ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS
105 Village Drive
Aptos

### CITY

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

#### IF APPLICABLE, LIST DATE:
- / / 16

#### 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
- $100,001 - $1,000,000
- 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
  - Charlotte Dunlap

---

* You are not required to report loans from commercial lending institutions 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

### INTEREST RATE
- %
- None

### TERM (Months/Years)

### HIGHEST BALANCE DURING REPORTING PERIOD
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- Over $100,000
- Guarantor, if applicable

---

FPPC Form 700 (2016/2017) Sch. B
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

CALEIFORNIA FORM
FAIR POLITICAL PRACTICES COMMISSION

Name
Randy Johnson

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Cassidy Insurance

ADDRESS (Business Address Acceptable)
108 Whispering Pines Dr, Ste 200, Scotts Valley, CA 95066

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insurance

YOUR BUSINESS POSITION
Sales

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
(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
(Describe)

☐ Other ____________________________
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, 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:

FPPC Form 700 (2016/2017) Sch. C
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
## 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>Successor Agency of the Scotts Valley Redevelopment Agency</td>
<td>N/A</td>
<td>Board Member</td>
<td>City of Scotts Valley</td>
<td>Annual</td>
<td>01/01/16 – 12/31/16</td>
</tr>
<tr>
<td>Santa Cruz County Regional Transportation Commission</td>
<td>N/A</td>
<td>Board Member</td>
<td>County of Santa Cruz</td>
<td>Annual</td>
<td>01/01/16 – 12/31-16</td>
</tr>
</tbody>
</table>