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FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

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SEP 2 3 2020

Please type or print in ink.			D	ISTRICT SECRETA
NAME OF FILER (LAST)	(FIRST)			(MBPFFICE
Li	J	anice		
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)				
Bhy Aren Rapid 7				
Division, Board, Department, District, if ap	pplicable	Your Position		
District 8		Direc	ctor	
> If filing for multiple positions, list below	or on an allachment. (Do	not use acronyms)		
Agency: Capitol Corridor	Joint Powers Ant	hority Position:	Director	<u></u>
. Jurisdiction of Office (Check at	least one box)			
State		Judge, Retin (Statewide J		e, or Court Commissioner
Multi-County Alameda, Contra	Costa, San Fran	Cisco County of		
City of				
		The second second		
. Type of Statement (Check at lea				
Annual: The period covered is Janu December 31, 2019.	ary 1, 2019, through	Leaving O	ffice: Date Left/_ (Check one cit	
-or- The period covered is December 31, 2019.	/, th	rough O The per leaving	riod covered is January 1 office.	, 2019, through the date of
Assuming Office: Date assumed _	//	○ The per		, through
Candidate: Date of Election	and office	sought, if different than Part	1:	
. Schedule Summary (must co	mplete) > Total nu	umber of pages includi	ng this covor page	•
Schedules attached		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	y,.,.,.,.	
Schedule A-1 - Investments - sch	odule attached	Schedule C - Incon	ne. Loans. & Business Po	ositions - schedule attached
Schedule A-2 - Investments – sch		Libert .	ne - Gifts - schedule atta	
Schedule B - Real Property - sch	nedule attached	Schedule E - Incon	ne – Gifts – Travel Paym	ents - schedule attached
or- None - No reportable inter	rests on any schedule			
. Verification		u ,		
MAILING ADDRESS STREET		YTIC	STATE	ZIP CODE
(Business or Agency Address Recommended - Public	- consumpting	0 1 1		
300 Lakegide Drive, P.	0. Box 12686	Oakland	CA	94604
300 Lakegide Drive, P. DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		94604
300 LAK 19; de Drive, P. DAYTIME TELEPHONE NUMBER (510)464 - 6095 I have used all reasonable diligence in pre	0. 융ox 1구666	EMAIL ADDRESS Janice. ve reviewed this statement an	Li @ bart.gov d to the best of my knowl	18 <u>2</u> .2
300 Lakigide Drive, P. DAYTIME TELEPHONE NUMBER (510)464 - 6095	0. Box 12666 eparing this statement. I have and complete. I ackno	EMAIL ADDRESS Janice. ve reviewed this statement an wledge this is a public docum	Li @ bavt.gov d to the best of my knowl ment.	14 <u>1</u>
300 Lak 19; de Drive, P. DAYTIME TELEPHONE NUMBER (510) 464 - 6005 I have used all reasonable diligence in pre herein and in any attached schedules is t	0. Box 12666 eparing this statement. I have and complete. I ackno	EMAIL ADDRESS JANICE. ve reviewed this statement an wledge this is a public docum California that the foregoing Signature	Li @ bavt.gov d to the best of my knowl ment.	edge the information contained

## SCHEDULE C Income, Loans, & Business Positions



(Other than Gifts and Travel Payments)

Janice Li

1. INCOME RECEIVED				
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME			
San Francisco Bicycle Coalition				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
1720 Market St., SF CA 94102				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Full-time employment				
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION			
Advocacy Director	A strange of the second strange of the second			
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Or			
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000			
□ \$10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000			
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED			
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)			
Sale of	Sale of			
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)			
Loan repayment	Loan repayment			
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more			
(Describe)	(Describe)			
Other (Describe)	Other (Describe)			
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING				
You are not required to report loans from a commercia a retail installment or credit card transaction, made in the	I lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender			
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)			
	%  None			
ADDRESS (Business Address Acceptable)				
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence			
	Real Property			
HIGHEST BALANCE DURING REPORTING PERIOD	Street address			
\$500 - \$1,000				
	City			
\$1,001 - \$10,000	Guarantor			
\$10,001 - \$100,000				

(Describe)

Comments: