CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

DATE INITIALLY FILED: AUG 10 2018
RECEIVED: 
ALBANY CITY CLERK

Please type or print in ink.

NAME OF FILER (LAST)    (FIRST)    (MIDDLE)
Jordan       Preston       Davis

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Albany

Division, Board, Department, District, if applicable
N/A

Your Position
City Council member candidate

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 Albany
☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ County of __________________________
☐ Other ______________________________

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

☐ Leaving Office: Date Left ______/_____/______
☐ Assuming Office: Date assumed ______/_____/______
☐ The period covered is ______/_____/______, through December 31, 2017.
☐ The period covered is ______/_____/______, through the date of leaving office.
☐ Candidate: Date of Election 6 Nov 2018 and office sought, if different than Part 1: ________________________________

4. Schedule Summary (must complete)  ► Total number of pages including this cover page: 2

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
Business or Agency Address Recommended - Public Document
1 Cyclotron Road Berkeley CA 94720

STREET

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER
(510) 418-9660
E-MAIL ADDRESS
prestenforalbany@gmail.com

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 August 10, 2018
Signature ________________________________
(Fill the originally signed statement with your handwriting)

FPCC Form 700 (2017/2018)
FPCC Advice Email: advice@fpcc.ca.gov
FPCC Toll-Free Helpline: 866/275-3772 www.fpcc.ca.gov
# SCHEDULE C
## Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

### 1. INCOME RECEIVED

**NAME OF SOURCE OF INCOME**

Metropolitan Life (Metlife)

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF SOURCE**

Insurance

**YOUR BUSINESS POSITION**

None

**GROSS INCOME RECEIVED**

- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [X] $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
- [X] 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**

[ ] 0% [ ] None

**TERM (Months/Years)**

**SECURITY FOR LOAN**

- [ ] None
- [ ] Personal residence
- [ ] Real Property
  - Street address
  - City
- [ ] Guarantor
- [ ] Other (Describe)

**Comments:**

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FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov