1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   California State Controller
   Division, Board, Department, District, if applicable
   Your Position
   Deputy Controller, Legislative Affairs
   ► 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 ____________________________
   ☐ 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, 2015, through December 31, 2015.
   -or-
   The period covered is ______/_____/______, through December 31, 2015.
   ☐ Leaving Office: Date Left ______/_____/______
   (Check one)
   ☐ The period covered is January 1, 2015, through the date of leaving office.
   -or-
   The period covered is ______/_____/______, through the date of leaving office.
   ☐ Assuring Office: Date assumed ______/_____/______
   ☐ Candidate: Election year _______ and office sought, if different than Part 1: ____________________________

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

5. Verification
   Mailing Address
   300 Capitol Mall, Suite 1850
   Sacramento, CA 95814
   Daytime Telephone Number
   (916) 327-1091
   Email Address
   egoldberg@sco.ca.gov
   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
   statement made by me above is true and correct.
   Date Signed 01/11/2016
   Signature
SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)
Do not attach brokerage or financial statements.

NAME OF BUSINESS ENTITY
Collage-Palmolive

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturer

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

NATURE OF INVESTMENT
☒ Stock ☐ Other
☐ Partnership ☐ Income Received of $0 - $499
☐ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
/ / 15
ACQUIRED
/ / 15
DISPOSED

NAME OF BUSINESS ENTITY
Proctor & Gamble

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturer

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

NATURE OF INVESTMENT
☒ Stock ☐ Other
☐ Partnership ☐ Income Received of $0 - $499
☐ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
/ / 15
ACQUIRED
/ / 15
DISPOSED

NAME OF BUSINESS ENTITY
Costco Wholesale

GENERAL DESCRIPTION OF THIS BUSINESS
Wholesaler/Retailer

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

NATURE OF INVESTMENT
☒ Stock ☐ Other
☐ Partnership ☐ Income Received of $0 - $499
☐ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
/ / 15
ACQUIRED
/ / 15
DISPOSED

NAME OF BUSINESS ENTITY
Starbucks

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturer/Retailer

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

NATURE OF INVESTMENT
☒ Stock ☐ Other
☐ Partnership ☐ Income Received of $0 - $499
☐ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
/ / 15
ACQUIRED
/ / 15
DISPOSED

NAME OF BUSINESS ENTITY
Johnson & Johnson

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturer

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

NATURE OF INVESTMENT
☒ Stock ☐ Other
☐ Partnership ☐ Income Received of $0 - $499
☐ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
/ / 15
ACQUIRED
/ / 15
DISPOSED

NAME OF BUSINESS ENTITY
Wal-Mart

GENERAL DESCRIPTION OF THIS BUSINESS
Retailer

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

NATURE OF INVESTMENT
☒ Stock ☐ Other
☐ Partnership ☐ Income Received of $0 - $499
☐ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
/ / 15
ACQUIRED
/ / 15
DISPOSED

Comments: 

FPPC Form 700 (2015/2016) Sch. A-1
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
NAME OF SOURCE OF INCOME
Robert Shulman

ADDRESS (Business Address Acceptable)
238 N. Auburn, Grass Valley, CA 95945

BUSINESS ACTIVITY, IF ANY, OF SOURCE
NA

YOUR BUSINESS POSITION
NA

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 [car.
(Real property, car, boat, etc.)]
☐ Loan repayment
☐ Commission or ☐ Rental Income, list each source of $10,000 or more
☐ Other [Describe]

☐ Other [Describe]

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 [Describe]
(Real property, car, boat, etc.)
☐ Loan repayment
☐ Commission or ☐ Rental Income, list each source of $10,000 or more
☐ Other [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]
☐ Guarantor [City]
☐ Other [Describe]

Comments: