

DATE May 28, 1986 TO Janice FROM Adelle

Here is the resignation letter from
Lauretta Sue Roles of the East Del
Paso Sts Target Area Committee.

Per our telephone conversation, you will
re-open recruitment on June 4 and
will close recruitment on June 27, 1986.

Thank you for your assistance.



SACRAMENTO
HOUSING
AND
REDEVELOPMENT
AGENCY



RECEIVED
CITY CLERK'S OFFICE
CITY OF SACRAMENTO
MAY 28 3 09 PM '86

RECEIVED
CITY CLERKS OFFICE
CITY OF SACRAMENTO

MAY 28 3 09 PM '86

May 21, 1986

To Whom It May Concern:

I regret in part that I must write this letter of resignation. Due to family conflicts I do not feel I can fulfill my responsibilities on the East Del Paso Heights Target Area Committee.

With this resignation I would like to suggest two things and that is that the committee members should conduct themselves in a manner which would not show personality conflicts to the visitors from the community and that the meetings should be conducted in a timely manner.

I do hope to be able to continue to come to some of the meetings as a concerned community member but I feel it is in the best interest of the committee if I resign at this time.

APPROVED
BY THE CITY COUNCIL

JUN 4 - 1986

OFFICE OF THE
CITY CLERK

Respectfully submitted,

Lauretta S. Roles

Lauretta S. Roles

FORM 730

Statement of Economic Interests For Designated Employees

PUBLIC DOCUMENT

RECEIVED
NEW CLERK OFFICE
CITY OF SACRAMENTO

FEB 28 3 14 PM '96

Important Notice to Filers: The Political Reform Act is intended to prevent conflicts of interest by requiring public officials such as yourself to disclose financial interests which could foreseeably cause conflicts. In addition, as a public official, you may be required to disqualify yourself from making, participating in, or attempting to influence any governmental decision which will affect your financial interests, including those you are required to report on this Statement. The Fair Political Practices Commission's *Guide to the Political Reform Act: California's Conflict of Interest Law for Public Officials* explains what a conflict of interest is, and when disqualification is required by law. Failure to file your Statement before the filing deadline may result in penalties including but not limited to late fines. This statement is a public document open for inspection and reproduction by any person.

Please type or print in ink

NAME STEPHEN E. HAIDET		
STATE DEPARTMENT AND UNIT OR LOCAL AGENCY MAU. MIRZA INC.	BUSINESS:	POSITION PRINCIPAL
MAILING ADDRESS 2555 THIRD ST. SACTO., CA. 95818		TELEPHONE NUMBER (916) 441-0686

Check the appropriate box(es):

- INITIAL STATEMENT:** The Conflict of Interest Code for your agency became effective on _____ (DATE). You must file a Statement within thirty days after this date disclosing your reportable interests held on this date. You are not required to disclose income, gifts or loans on this Statement.
- ASSUMING OFFICE STATEMENT:** You have assumed office on _____ (DATE). You must disclose all reportable interests, other than income, gifts and loans, held on the date you assumed your position.
- Position subject to State Senate confirmation — file thirty days after appointment or nomination.
- All other positions — file thirty days after assuming office.
- ANNUAL STATEMENT:** You are required to file a Statement no later than _____ (DATE) disclosing all reportable interests held or received during the period from January 1, _____ through December 31, _____.
- LEAVING OFFICE STATEMENT:** You are leaving or have left your position on _____ (DATE) and must file a Statement within thirty days of that date. You must disclose all reportable interests held or received during the period from January 1, _____ through the date you left office.
- CANDIDATE STATEMENT:** You are a candidate for elective office. You must disclose all reportable interests, other than income, gifts and loans, held on the date you filed nomination papers. You must file this Statement no later than the final filing date of a declaration of candidacy.

The Following Summary Must Be Completed By All Filers

(Do not complete this summary until you have reviewed all schedules and the instructions on the opposite page from each schedule carefully.)

SCHEDULE A — Investments

- Schedule completed and attached No reportable interests Schedule not applicable to my disclosure category

SCHEDULE B — Interests in Real Property

- Schedule completed and attached No reportable interests Schedule not applicable to my disclosure category

SCHEDULE C — Interests in Real Property and Investments Held by Business Entities or Trusts

- Schedule completed and attached No reportable interests Schedule not applicable to my disclosure category

SCHEDULE D — Income (other than Gifts and Loans)

- Schedule completed and attached No reportable interests Schedule not applicable to this type of statement or to my disclosure category

SCHEDULE E — Income (Loans)

- Schedule completed and attached No reportable interests Schedule not applicable to this type of statement or to my disclosure category

SCHEDULE F — Income (Gifts)

- Schedule completed and attached No reportable interests Schedule not applicable to this type of statement or to my disclosure category

SCHEDULE G — Business Positions

- Schedule completed and attached No reportable interests Schedule not applicable to my disclosure category

SCHEDULE H — Income and Loans to Business Entities (Including Rental Property)

- Schedule completed and attached No reportable interests Schedule not applicable to this type of statement or to my disclosure category

NOTE: Filers whose reportable interests on any particular schedule have not changed since a previously filed Annual Statement may attach copies of the appropriate schedule from the previous annual Statement. Please discard those schedules on which you have nothing to report.

VERIFICATION

I have used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 2/28 (Date), 19 86 at Sacramento (Place)

SIGNATURE Stephen S. Haidet

All of the information required by this form is mandatory, is required by the provisions of the Political Reform Act, Government Code Section 81000 et seq., and will be available to any member of the public upon request. This information is to be used to reveal to public scrutiny certain financial interests of public officials and employees in order to disclose potential conflicts of interests and to aid in the prevention of actual conflicts of interests.

Schedule G — Business Positions

(See Instructions on Preceding Page)

NAME OF ENTITY <u>MAU. MIRZA INC.</u>	ADDRESS OF ENTITY <u>2555 THIRD ST., SACTO, CA.</u>
DESCRIPTION OF BUSINESS ACTIVITY <u>ARCHITECTS & PLANNERS</u>	YOUR JOB TITLE OR POSITION <u>PRINCIPAL</u>
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	POSITION COMMENCED ON <u>1984</u> POSITION TERMINATED ON _____
NAME OF ENTITY	ADDRESS OF ENTITY
DESCRIPTION OF BUSINESS ACTIVITY	YOUR JOB TITLE OR POSITION
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO	POSITION COMMENCED ON _____ POSITION TERMINATED ON _____
NAME OF ENTITY	ADDRESS OF ENTITY
DESCRIPTION OF BUSINESS ACTIVITY	YOUR JOB TITLE OR POSITION
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO	POSITION COMMENCED ON _____ POSITION TERMINATED ON _____
NAME OF ENTITY	ADDRESS OF ENTITY
DESCRIPTION OF BUSINESS ACTIVITY	YOUR JOB TITLE OR POSITION
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO	POSITION COMMENCED ON _____ POSITION TERMINATED ON _____
NAME OF ENTITY	ADDRESS OF ENTITY
DESCRIPTION OF BUSINESS ACTIVITY	YOUR JOB TITLE OR POSITION
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO	POSITION COMMENCED ON _____ POSITION TERMINATED ON _____
NAME OF ENTITY	ADDRESS OF ENTITY
DESCRIPTION OF BUSINESS ACTIVITY	YOUR JOB TITLE OR POSITION
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO	POSITION COMMENCED ON _____ POSITION TERMINATED ON _____
NAME OF ENTITY	ADDRESS OF ENTITY
DESCRIPTION OF BUSINESS ACTIVITY	YOUR JOB TITLE OR POSITION
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO	POSITION COMMENCED ON _____ POSITION TERMINATED ON _____
NAME OF ENTITY	ADDRESS OF ENTITY
DESCRIPTION OF BUSINESS ACTIVITY	YOUR JOB TITLE OR POSITION
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO	POSITION COMMENCED ON _____ POSITION TERMINATED ON _____

RECEIVED
CITY CLERK'S OFFICE
FEB 23 3 14 PM '86

BACKGROUND INFORMATION FORM

Pursuant to Ordinance 83-156, Sec. 2.126-34, adopted by the Sacramento City Council December 20, 1983, completion of this form is required by applicants to the following City Boards and Commissions:

ADMINISTRATION, INVESTMENT AND FISCAL MANAGEMENT BOARD OF THE CITY RETIREMENT SYSTEM

CIVIL SERVICE BOARD

CONSTRUCTION CODE ADVISORY AND APPEALS BOARD

DESIGN REVIEW AND PRESERVATION BOARD

HOUSING CODE ADVISORY AND APPEALS BOARD

OLD SACRAMENTO VARIANCE APPEALS BOARD

PLANNING COMMISSION

RETIREMENT HEARING COMMISSION

This form is to be submitted to the Office of the City Clerk within two days of the date the recommendation by the Personnel and Public Employees Committee for appointment to the above City Boards or Commissions.

Information contained on this form is strictly confidential.

APPLICANT'S NAME STEPHEN E. HAIDET

BOARD OR COMMISSION VACANCY APPLIED FOR Construction Code Advisory and Appeals-Board

RESIDENCE ADDRESS 3533 Lindenwood Way, Sacramento, CA 95826
(Include Zip Code)

HOME TELEPHONE 916-366-0232 MESSAGE Ø BUSINESS 916-441-0686

BUSINESS NAME MAU-MIRZA, INC., Architects - Planners

BUSINESS ADDRESS 2555 Third Street, Suite 255
(Include Zip Code) Sacramento, CA 95818

ROUND INFORMATION FORM (Continued)

List names, addresses and dates of employers for the last five (5) years.

1. MAU-MIRZA, INC. Architects - Planners
2555 Third Street, Suite 255
Sacramento, CA 95818 (Since 1978)
2. _____

3. _____

4. _____

5. _____

B. List names and addresses of any business enterprises currently or previously owned or operated, state position held.

1. NONE

2. _____

3. _____

C. State all felony convictions, if any, indicating for each conviction the date of conviction, the location of the court of conviction, and the exact denomination of the offense resulting in conviction.

1. NONE

2. _____

D. List each civil action, if any, in which punitive or exemplary damages have been assessed against the applicant, indicating in each instance the date of the trial court judgment and the location of the court which rendered judgment.

1. NONE

2. _____

E. List each fictitious business name, if any, used at any time within the past five years.

1. NONE

2. _____

3. _____

I declare, under penalty of perjury, the foregoing statements are true and correct to the best of my knowledge.

Stephen D. Haidet 2/28/86
APPLICANT

FORM 730

Statement of Economic Interests For Designated Employees PUBLIC DOCUMENT

Important Notice to Filers: The Political Reform Act is intended to prevent conflicts of interest by requiring public officials such as yourself to disclose financial interests which could foreseeably cause conflicts. In addition, as a public official, you may be required to disqualify yourself from making, participating in, or attempting to influence any governmental decision which will affect your financial interests, including those you are required to report on this Statement. The Fair Political Practices Commission's *Guide to the Political Reform Act: California's Conflict of Interest Law for Public Officials* explains what a conflict of interest is, and when disqualification is required by law. Failure to file your Statement before the filing deadline may result in penalties including but not limited to late fines. This statement is a public document open for inspection and reproduction by any person.

Please type or print in ink

NAME

RONALD ALLEN RETA

STATE DEPARTMENT AND UNIT OR LOCAL AGENCY

HOUSING CODE ADVISORY & APPEALS BLD.

POSITION

PUBLIC MEMBER

MAILING ADDRESS

209 SANTA YNEZ WAY SACTO 95816

TELEPHONE NUMBER

(916) 454-2483

Check the appropriate box(es):



INITIAL STATEMENT: The Conflict of Interest Code for your agency became effective on _____ (DATE). You must file a Statement within thirty days after this date disclosing your reportable interests held on this date. You are not required to disclose income, gifts or loans on this Statement.



ASSUMING OFFICE STATEMENT: You have assumed office on _____ (DATE). You must disclose all reportable interests, other than income, gifts and loans, held on the date you assumed your position.



Position subject to State Senate confirmation — file thirty days after appointment or nomination.



All other positions — file thirty days after assuming office.



ANNUAL STATEMENT: You are required to file a Statement no later than _____ (DATE) disclosing all reportable interests held or received during the period from January 1, _____ through December 31, _____.



LEAVING OFFICE STATEMENT: You are leaving or have left your position on _____ (DATE) and must file a Statement within thirty days of that date. You must disclose all reportable interests held or received during the period from January 1, _____ through the date you left office.



CANDIDATE STATEMENT: You are a candidate for elective office. You must disclose all reportable interests, other than income, gifts and loans, held on the date you filed nomination papers. You must file this Statement no later than the final filing date of a declaration of candidacy.

The Following Summary Must Be Completed By All Filers

(Do not complete this summary until you have reviewed all schedules and the instructions on the opposite page from each schedule carefully.

SCHEDULE A — Investments

Schedule completed and attached No reportable interests Schedule not applicable to my disclosure category

SCHEDULE B — Interests in Real Property

Schedule completed and attached No reportable interests Schedule not applicable to my disclosure category

SCHEDULE C — Interests in Real Property and Investments Held by Business Entities or Trusts

Schedule completed and attached No reportable interests Schedule not applicable to my disclosure category

SCHEDULE D — Income (other than Gifts and Loans)

Schedule completed and attached No reportable interests Schedule not applicable to this type of statement or to my disclosure category

SCHEDULE E — Income (Loans)

Schedule completed and attached No reportable interests Schedule not applicable to this type of statement or to my disclosure category

SCHEDULE F — Income (Gifts)

Schedule completed and attached No reportable interests Schedule not applicable to this type of statement or to my disclosure category

SCHEDULE G — Business Positions

Schedule completed and attached No reportable interests Schedule not applicable to my disclosure category

SCHEDULE H — Income and Loans to Business Entities (Including Rental Property)

Schedule completed and attached No reportable interests Schedule not applicable to this type of statement or to my disclosure category

NOTE: Filers whose reportable interests on any particular schedule have not changed since a previously filed Annual Statement may attach copies of the appropriate schedule from the previous annual Statement. Please discard those schedules on which you have nothing to report.

VERIFICATION

I have used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 20 February 1986, 19 at 309 SANTA YNEZ WAY, SACO (Date) (Place)

SIGNATURE [Handwritten Signature]

All of the information required by this form is mandatory, is required by the provisions of the Political Reform Act, Government Code Section 81000 et seq., and will be available to any member of the public upon request. This information is to be used to reveal to public scrutiny certain financial interests of public officials and employees in order to disclose potential conflicts of interests and to aid in the prevention of actual conflicts of interests.

Schedule A — Investments
(See Instructions on Preceding Page)

NAME OF BUSINESS ENTITY CARREMI ROHRER ASSOCIATES		VALUE <input type="checkbox"/> \$1,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTERESTS, E.G., COMMON STOCK, PARTNERSHIP INTEREST STOCK		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY ARCHITECTS & PLANNERS	IF NOT HELD THROUGHOUT THIS PERIOD, THIS INTEREST WAS: <input type="checkbox"/> ACQUIRED DATE _____ <input type="checkbox"/> DISPOSED DATE _____	OWNERSHIP INTEREST <input checked="" type="checkbox"/> Less than 10% * <input type="checkbox"/> 10% or greater
NAME OF BUSINESS ENTITY		VALUE <input type="checkbox"/> \$1,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTERESTS, E.G., COMMON STOCK, PARTNERSHIP INTEREST		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	IF NOT HELD THROUGHOUT THIS PERIOD, THIS INTEREST WAS: <input type="checkbox"/> ACQUIRED DATE _____ <input type="checkbox"/> DISPOSED DATE _____	OWNERSHIP INTEREST <input type="checkbox"/> Less than 10% * <input type="checkbox"/> 10% or greater
NAME OF BUSINESS ENTITY		VALUE <input type="checkbox"/> \$1,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTERESTS, E.G., COMMON STOCK, PARTNERSHIP INTEREST		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	IF NOT HELD THROUGHOUT THIS PERIOD, THIS INTEREST WAS: <input type="checkbox"/> ACQUIRED DATE _____ <input type="checkbox"/> DISPOSED DATE _____	OWNERSHIP INTEREST <input type="checkbox"/> Less than 10% * <input type="checkbox"/> 10% or greater
NAME OF BUSINESS ENTITY		VALUE <input type="checkbox"/> \$1,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTERESTS, E.G., COMMON STOCK, PARTNERSHIP INTEREST		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	IF NOT HELD THROUGHOUT THIS PERIOD, THIS INTEREST WAS: <input type="checkbox"/> ACQUIRED DATE _____ <input type="checkbox"/> DISPOSED DATE _____	OWNERSHIP INTEREST <input type="checkbox"/> Less than 10% * <input type="checkbox"/> 10% or greater
NAME OF BUSINESS ENTITY		VALUE <input type="checkbox"/> \$1,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTERESTS, E.G., COMMON STOCK, PARTNERSHIP INTEREST		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	IF NOT HELD THROUGHOUT THIS PERIOD, THIS INTEREST WAS: <input type="checkbox"/> ACQUIRED DATE _____ <input type="checkbox"/> DISPOSED DATE _____	OWNERSHIP INTEREST <input type="checkbox"/> Less than 10% * <input type="checkbox"/> 10% or greater
NAME OF BUSINESS ENTITY		VALUE <input type="checkbox"/> \$1,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTERESTS, E.G., COMMON STOCK, PARTNERSHIP INTEREST		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	IF NOT HELD THROUGHOUT THIS PERIOD, THIS INTEREST WAS: <input type="checkbox"/> ACQUIRED DATE _____ <input type="checkbox"/> DISPOSED DATE _____	OWNERSHIP INTEREST <input type="checkbox"/> Less than 10% * <input type="checkbox"/> 10% or greater
NAME OF BUSINESS ENTITY		VALUE <input type="checkbox"/> \$1,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTERESTS, E.G., COMMON STOCK, PARTNERSHIP INTEREST		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	IF NOT HELD THROUGHOUT THIS PERIOD, THIS INTEREST WAS: <input type="checkbox"/> ACQUIRED DATE _____ <input type="checkbox"/> DISPOSED DATE _____	OWNERSHIP INTEREST <input type="checkbox"/> Less than 10% * <input type="checkbox"/> 10% or greater

NOTE: IF YOU ARE COMPLETING AN ANNUAL OR LEAVING OFFICE STATEMENT, YOU MUST REPORT ON SCHEDULE D ANY SALARY, COMMISSION, DISTRIBUTION OR OTHER INCOME (\$250 OR MORE) FROM INVESTMENTS LISTED ON SCHEDULE A RECEIVED BY YOU OR YOUR SPOUSE.

*If you have checked this box, you may have to report the interests in real property and investments held by the business entity on Schedule C. In addition, if you are completing an Annual or Leaving Office Statement you must report your pro rata share of the business' total gross income on Schedule D, and if your pro rata share of the gross income from any one source was \$10,000 or more, the name of that source on Schedule H.

Name RONALD A. RETA

Schedule D — Income (Other than Gifts and Loans)

(See Instructions on Preceding Page)

NAME OF SOURCE OF INCOME CARISSIMI ROHREN ASSOCIATES	AMOUNT <input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> Over \$10,000
ADDRESS OF SOURCE OF INCOME 1515 RIVER PARK DRIVE #200 SACTO 95815	
BUSINESS ACTIVITY OF SOURCE OF INCOME, IF ANY ARCHITECTURE AND PLANNING	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED SALARIED EMPLOYEE	
NAME OF SOURCE OF INCOME	AMOUNT <input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS OF SOURCE OF INCOME	
BUSINESS ACTIVITY OF SOURCE OF INCOME, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
NAME OF SOURCE OF INCOME	AMOUNT <input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS OF SOURCE OF INCOME	
BUSINESS ACTIVITY OF SOURCE OF INCOME, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
NAME OF SOURCE OF INCOME	AMOUNT <input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS OF SOURCE OF INCOME	
BUSINESS ACTIVITY OF SOURCE OF INCOME, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
NAME OF SOURCE OF INCOME	AMOUNT <input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS OF SOURCE OF INCOME	
BUSINESS ACTIVITY OF SOURCE OF INCOME, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	

EXHIBIT B

The members of the Housing Code Advisory and Appeals Board shall disclose the following interests and information:

1. Any interest in real property within the jurisdiction.

309 SANTA YNEZ WAY (RESIDENCE)

2. Any investment in a business entity engaged in the following types of business: Real estate, building construction including specialty contracting work relating to building construction, building demolition, building material supply, junk dealer, or auto dismantling.

SHAREHOLDER, CARISSIMI-ROHRER ASSOCIATES, ARCHITECTS & PLANNERS INC.

3. Any investment in a business entity which located within the city.

SAME AS #2 ABOVE

4. Any source of income from a business entity described in paragraphs 2 or 3 above.

EMPLOYED AND SALARIED BY CARISSIMI-ROHRER ASSOCIATES, ARCHITECTS & PLANNERS

5. Any position of employment or management with a business entity

described in paragraphs 2 or 3 above.

PRINCIPAL OF CARISSIMI-ROHRER ASSOCIATES

BACKGROUND INFORMATION FORM

Pursuant to Ordinance 83-156, Sec. 2.126-34, adopted by the Sacramento City Council December 20, 1983, completion of this form is required by applicants to the following City Boards and Commissions:

ADMINISTRATION, INVESTMENT AND FISCAL MANAGEMENT BOARD OF THE CITY RETIREMENT SYSTEM

CIVIL SERVICE BOARD

CONSTRUCTION CODE ADVISORY AND APPEALS BOARD

DESIGN REVIEW AND PRESERVATION BOARD

HOUSING CODE ADVISORY AND APPEALS BOARD ✓

OLD SACRAMENTO VARIANCE APPEALS BOARD

PLANNING COMMISSION

RETIREMENT HEARING COMMISSION

This form is to be submitted to the Office of the City Clerk within two days of the date the recommendation by the Personnel and Public Employees Committee for appointment to the above City Boards or Commissions.

Information contained on this form is strictly confidential.

APPLICANT'S NAME RONALD ALLEN RETA

BOARD OR COMMISSION VACANCY APPLIED FOR Housing Code Advisory and Appeals Board

RESIDENCE ADDRESS 309 SANTA YNEZ WAY
(Include Zip Code) SACRAMENTO 95816

HOME TELEPHONE 454-2483 MESSAGE 920-2929 BUSINESS 920-2929

BUSINESS NAME CARISSIMI ROHRER ASSOCIATES

ARCHITECTS AND PLANNERS, INC
BUSINESS ADDRESS 1515 RIVER PARK DRIVE #100
(Include Zip Code) SACRAMENTO 95815

BACKGROUND INFORMATION FORM (Continued)

List names, addresses and dates of employers for the last five (5) years.

1. 1979 - PRESENT
CARISSIMI ROHLER ASSOCIATES
1515 RIVER PARK DRIVE #200 SACO 95815
2. _____

3. _____

4. _____

5. _____

B. List names and addresses of any business enterprises currently or previously owned or operated, state position held.

1. CARISSIMI ROHLER ASSOCIATES
PRINCIPAL (SHAREHOLDER) 1984 - PRESENT
2. _____

3.

C. State all felony convictions, if any, indicating for each conviction the date of conviction, the location of the court of conviction, and the exact denomination of the offense resulting in conviction.

1. NONE

2.

D. List each civil action, if any, in which punitive or exemplary damages have been assessed against the applicant, indicating in each instance the date of the trial court judgment and the location of the court which rendered judgment.

1. NONE

2.

E. List each fictitious business name, if any, used at any time within the past five years.

1. NONE

2.

3.

I declare, under penalty of perjury, the foregoing statements are true and correct to the best of my knowledge.

[Handwritten Signature]
APPLICANT