NAME OF FILER (LAST) - EDGREN
(FIRST) - ROBERT
(MIDDLE) - ANTHONY

1. Office, Agency, or Court

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

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 
[ ] 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.
[ ] Assuming Office: Date assumed / / 
[ ] Leaving Office: Date Left / / (Check one)
- or -
The period covered is January 1, 2015, through the date of leaving office.
- or -
The period covered is through the date of leaving office.
[ ] Candidate: Election year 2016 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
- or -
[ ] None - No reportable interests on any schedule

5. Verification

Mailing Address - 204 Monterey Ave. Capitola CA 95010
City: St: Zip: 
(Business or Agency Address Recommended - Public Document)

Daytime Telephone Number - (831) 402-2111
E-mail Address - agreen7@ yahoo.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 - Aug. 17, 2016
Signature -
**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

<table>
<thead>
<tr>
<th>ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS</th>
<th>ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>511 Capitol Ave, Capitola</td>
<td></td>
</tr>
<tr>
<td>Apt 035-09, B39</td>
<td></td>
</tr>
<tr>
<td>Capitola, CA 95010</td>
<td></td>
</tr>
</tbody>
</table>

### Fair Market Value

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

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td>/ / 15</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>ACQUIRED</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td>DISPOSED</td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
</tr>
</tbody>
</table>

### Nature of Interest

- **Ownership/Deed of Trust**
- **Leasehold**
  - Yrs. remaining
  - Other
- **Easement**

### If Rental Property, Gross Income Received

- **IF RENTAL PROPERTY, GROSS INCOME RECEIVED**
  - $0 - $499
  - $500 - $1,000
  - $1,001 - $10,000
  - $10,001 - $100,000
  - 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**

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*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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
</tr>
<tr>
<td>INTEREST RATE</td>
<td>INTEREST RATE</td>
</tr>
<tr>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>HIGHEST BALANCE DURING REPORTING PERIOD</td>
<td>HIGHEST BALANCE DURING REPORTING PERIOD</td>
</tr>
<tr>
<td>$500 - $1,000</td>
<td>$500 - $1,000</td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
<td>$1,001 - $10,000</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>$10,001 - $100,000</td>
</tr>
<tr>
<td>OVER $100,000</td>
<td>OVER $100,000</td>
</tr>
<tr>
<td>Guarantor, if applicable</td>
<td>Guarantor, if applicable</td>
</tr>
</tbody>
</table>

Comments:

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FPPC Form 700 (2015/2016) Sch. B  
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772  www.fppc.ca.gov