CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Hasselbrink Shelley A

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Los Alamitos
Division, Board, Department, District, if applicable
City Council Member

▸ 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 Los Alamitos
☐ 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, 2016, through December 31, 2016.
☐ Leaving Office: Date Left ______/______/____
☐ -or- The period covered is ______/______/______, through December 31, 2016.
☐ Date assumed ______/______/____
☐ -or-
☐ Assuming Office: Date assumed ______/______/____
☐ The period covered is ______/______/______, through the date of leaving office.

☐ Candidate: Election year ____________ and office sought, if different than Part 1: ____________

4. Schedule Summary (must complete) ▸ Total number of pages including this cover page: 1

Schedules attached

☐ Schedule A-1 - Investments - schedule attached
☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule A-2 - Investments - schedule attached
☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule B - Real Property - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

☐-OR-
☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
(Business or Agency Address Recommended - Public Document)

STREET

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER _____________________________

E-MAIL ADDRESS _____________________________

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 01/13/2017 03:24 PM

(month, day, year)

Signature ______________________________________________________________________

(Write the originally signed statement with your filing official.)

FPPC Form 700 (2016/2017)
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FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov