

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Del Rosario Marlène

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Oroville
Division, Board, Department, District, if applicable
City Council
Your Position
Council member

▶ If holding 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 Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of Oroville Other _____

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

Annual: The period covered is January 1, 2013, through December 31, 2013.
-or-
The period covered is _____, through December 31, 2013.
 Assuming Office: Date assumed _____
 Leaving Office: Date Left ____/____/____
(Check one)
 The period covered is January 1, 2013, through the date of leaving of office.
 The period covered is ____/____/____, through the date of leaving of office.
 Candidate: Election year 2014 and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."
▶ Total number of pages including this cover page: 1
 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 STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
3041 Orange Ave Oroville Ca 95966
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)
(530) 632-5744 marl1955@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 8-7-14 Signature
(month, day, year) (File the originally signed statement with your filing of ool.)