

Date Received
Official Use Only
City of Eureka
APR 12 2014

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
HATLEY ARTHUR J.

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
City of Eureka
Division, Board, Department, District, if applicable
City Council
Your Position
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 Eureka
 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, 2013, through December 31, 2013.
-or-
The period covered is / / , through December 31, 2013.
 Assuming Office: Date assumed / /
 Candidate: Election year 2014 and office sought, if different than Part 1:
 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.

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 (Business or Agency Address Recommended - Public Document) STREET CITY STATE ZIP CODE
Eureka CA 95905
DAYTIME TELEPHONE NUMBER (530) 533-9234
E-MAIL ADDRESS (OPTIONAL)

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 08-13-14 (month, day, year)

Signature [Handwritten Signature]
(File the originally signed statement with your filing official.)

Clear Page Print Form