

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

City of Oroville

Please type or print in ink.

NAME OF FILER (LAST) PITTMAN (FIRST) DAVID WARREN Administration
AUG 05 2016

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF OROVILLE
Division, Board, Department, District, if applicable

COUNCILMAN
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 OROVILLE
- 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, 2015, through December 31, 2015.
-or- The period covered is _____, through December 31, 2015.
- Assuming Office: Date assumed _____
- Candidate: Election year 2016 and office sought, if different than Part 1: _____
- Leaving Office: Date Left _____ (Check one)
○ The period covered is January 1, 2015, through the date of leaving office.
-or-
○ The period covered is _____, through the date of leaving office.

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 _____ STREET _____ CITY OROVILLE STATE CA. ZIP CODE 95966
(Business or Agency Address Recommended - Public Document)

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 AUGUST 3, 2016
(month, day, year)

Signature _____

(File the originally signed statement with your filing authority)

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
DAVID W. PITTMAN

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
3460 ORANGE AVENUE

CITY
OROVILLE

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

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

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Yrs. remaining 10 ESCROW Other

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
10 ESCROW
BUSINESS LOAN PAYMENTS

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1580 HAMILTON AVENUE

CITY
OROVILLE

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

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

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Yrs. remaining Other

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

* 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:

NAME OF LENDER*
PENDING APPLICATION

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% None _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER*
DOVENMUEHLE MONTAGE, LLC

ADDRESS (Business Address Acceptable)
P.O. BOX 7168, PASADENA CA

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
4.75% None 30

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____