

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

**CITY OF SAN LEANDRO**  
Date Received  
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**MAR 12 2007**  
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A Public Document

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
ATTARIAN	DALE	SCOTT	(510) 577-3251
MAILING ADDRESS (May use business address)	STREET	CITY	STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS
901 E 14th St San Leandro CA 94577			

**1. Office, Agency, or Court**

Name of Office, Agency, or Court:  
City of San Leandro

Division, Board, District, if applicable:  
Police Department

Your Position:  
Chief of Police

If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

- State
- County of \_\_\_\_\_
- City of SAN LEANDRO
- Multi-County \_\_\_\_\_
- Other \_\_\_\_\_

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

- Assuming Office/Initial Date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- Annual: The period covered is January 1, 2006, through December 31, 2006.
- OR-
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2006.
- Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- The period covered is January 1, 2006, through the date of leaving office.
- OR-
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate

**4. Schedule Summary**

- Total number of pages including this cover page: 1
- Check applicable schedules or "No reportable interests."
- I have disclosed interests on one or more of the attached schedules:
- Schedule A-1  Yes - schedule attached  
*Investments (Less than 10% Ownership)*
- Schedule A-2  Yes - schedule attached  
*Investments (10% or greater Ownership)*
- Schedule B  Yes - schedule attached  
*Real Property*
- Schedule C  Yes - schedule attached  
*Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)*
- Schedule D  Yes - schedule attached  
*Income - Gifts*
- Schedule E  Yes - schedule attached  
*Income - Travel Payments*
- OR-
- No reportable interests on any schedule

**5. Verification**

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 9th, 2007  
(month, day, year)

Signature Dale S. Attarian  
(File the originally signed statement with your filing official.)