

**CITY OF SAN LEANDRO**  
MAR 30 2010  
**CITY CLERK'S OFFICE**

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Williams	Jayne	W.	( 510 ) 808-2000	
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE
555 12th Street, 15th Fl.		Oakland	CA	94607
				OPTIONAL: E-MAIL ADDRESS
				jwilliams@meyersnave.com

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

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

Division, Board, District, if applicable:  
\_\_\_\_\_

Your Position:  
City Attorney

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

Agency: San Leandro Redevelopment Agency

Position: Agency Counsel

**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, 2009, through December 31, 2009.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2009.

Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)

The period covered is January 1, 2009, through the date of leaving office.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

Candidate Election Year: \_\_\_\_\_

**4. Schedule Summary**

▶ Total number of pages including this cover page: 3

▶ 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 – Gifts – 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 29, 2010  
*(month, day, year)*

Signature Jayne Williams  
*(File the originally signed statement with your filing official.)*

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Jayne W. Williams

▶ NAME OF BUSINESS ENTITY  
Meyers Nave Riback Silver & Wilson

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Professional Law Corporation

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income of \$0 - \$500  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/09      \_\_\_\_/\_\_\_\_/09  
ACQUIRED                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

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\_\_\_\_/\_\_\_\_/09      \_\_\_\_/\_\_\_\_/09  
ACQUIRED                  DISPOSED

Comments: \_\_\_\_\_

