

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Pearson	Neal	H	(510) 483-6351
MAILING ADDRESS (May use business address)	STREET	CITY	STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS
508 Estudillo Ave San Leandro Ca 94577			

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

Name of Office, Agency, or Court:  
Board of Zoning Adjustments

Division, Board, District, if applicable:  
Board member

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

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, 2007, through December 31, 2007.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_ through December 31, 2007.

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

The period covered is January 1, 2007, 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: \_\_\_\_\_

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 3/10/08  
(month, day, year)

Signature Neal Pearson  
(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 \_\_\_\_\_

> NAME OF BUSINESS ENTITY  
Neal Pearson A.D.S.

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)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
 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)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
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 \$100,001 - \$1,000,000       Over \$1,000,000

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

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
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 Stock  
 Other \_\_\_\_\_ (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
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 Other \_\_\_\_\_ (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
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IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
 ACQUIRED                      DISPOSED

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