| A PUBLIC D A PUBL | | |
|--|---|----------|
| IE OF FILER (LAST) Scher-Colbrie Mark Office, Agency, or Court Agency Name (Do not use acronyms) California Institute of Regenerative Medicine Division, Board, Department, District, if applicable ▶ If filing for multiple positions, list below or on an attachment. (Do not use acrony Agency: Agency: Jurisdiction of Office (Check at least one box) X State Office of Statement (Check at least one box) X Annual: The period covered is January 1, 2023, through December 31, 2023. | (MIDDLE) Your Position ICOC Board Member onyms) | |
| Scher-Colbrie Mark Office, Agency, or Court Agency Name (Do not use acronyms) California Institute of Regenerative Medicine Division, Board, Department, District, if applicable If filing for multiple positions, list below or on an attachment. (Do not use acrony Agency: Jurisdiction of Office (Check at least one box) State Multi-County City of Type of Statement (Check at least one box) X Annual: The period covered is January 1, 2023, through December 31, 2023. | Your Position ICOC Board Member inyms) | |
| Office, Agency, or Court Agency Name (Do not use acronyms) California Institute of Regenerative Medicine Division, Board, Department, District, if applicable ▶ If filing for multiple positions, list below or on an attachment. (Do not use acrony Agency: | ICOC Board Member | |
| Agency Name (Do not use acronyms) California Institute of Regenerative Medicine Division, Board, Department, District, if applicable If filing for multiple positions, list below or on an attachment. (Do not use acrony Agency: | ICOC Board Member | |
| California Institute of Regenerative Medicine Division, Board, Department, District, if applicable ▶ If filing for multiple positions, list below or on an attachment. (Do not use acrony Agency: | ICOC Board Member | |
| Division, Board, Department, District, if applicable ▶ If filing for multiple positions, list below or on an attachment. (Do not use acrony Agency: | ICOC Board Member | |
| ► If filing for multiple positions, list below or on an attachment. (Do not use acrony Agency: | ICOC Board Member | |
| ► If filing for multiple positions, list below or on an attachment. (Do not use acrony Agency: | nyms) | |
| ► If filing for multiple positions, list below or on an attachment. (Do not use acrony Agency: | nyms) | |
| Agency: | | |
| Jurisdiction of Office (Check at least one box) Image: State Image: Multi-County Image: City of Image: City of Image: Type of Statement (Check at least one box) Image: State Image: City of | Position: | |
| X State Multi-County City of Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through December 31, 2023or- | | |
| Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through December 31, 2023. | Judge, Retired Judge, Pro Tem Judge, or Court Commiss (Statewide Jurisdiction) County of | |
| Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through December 31, 2023. | Other | |
| Annual: The period covered is January 1, 2023, through December 31, 2023. | | |
| -or- | Leaving Office: Date Left/// (Check one circle.) | |
| The period covered is//, through December 31, 2023. | The period covered is January 1, 2023, through the of leaving office. -or- | date |
| Assuming Office: Date assumed// | The period covered is/, the date of leaving office. | hrough |
| Candidate: Date of Election and office sought, if different | erent than Part 1: | |
| Schedule Summary (required) | ages including this cover page: 14 | |
| Schedules attached | ages including this cover page: <u>14</u> | |
| Schedule A-1 - Investments – schedule attached Sched | edule C - Income, Loans, & Business Positions - schedule a | attached |
| □ Schedule A-2 - Investments – schedule attached □ Schedule □ Schedule B - Real Property – schedule attached □ Schedule | edule D - Income – Gifts – schedule attached | |

5. Verification

-or- Dore - No reportable interests on any schedule

 MAILING ADDRESS (Business or Agency Address Recommended - Public Document)
 CITY
 STATE
 ZIP CODE

 P.O. Box 980790
 West Sacramento
 CA
 95798-0790

 DAYTIME TELEPHONE NUMBER
 EMAIL ADDRESS
 EMAIL ADDRESS

 (510) 340-9114
 EMAIL ADDRESS
 EMAIL 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 | 02/17/2024 02:42 PM | Signature | Mark Fischer-Colbrie | |
|-------------|---------------------|-----------|---|--|
| - | (month, day, year) | | (File the originally signed paper statement with your filing official.) | |
| | | | | |

| | SCHEDULE A-1 | | CALIFORNIA FORM 700 | |
|---|--|----|--|--|
| | Inves | tn | nents | FAIR POLITICAL PRACTICES COMMISSION |
| | Stocks, Bonds, a Ownership Interes | | | |
| | Investments m Do not attach brokerag | | | |
| • | NAME OF BUSINESS ENTITY | Γ | NAME OF BUSINESS EN | ΤΙΤΥ |
| | Abbott Labs | | Aflac | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Pharmaceuticals | | Insurance | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | |
| | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | × \$2,000 - \$10,000 \$100,001 - \$1,000,000 | S10,001 - \$100,000 Over \$1,000,000 |
| | NATURE OF INVESTMENT | | NATURE OF INVESTMEN | т |
| | X Stock Other (Describe) | | Stock Other | (Describe) |
| | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income | Received of \$0 - \$499 Received of \$500 or More (Report on Schedule C) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DA | TE: |
| | | | <u> </u> | 23 |
| _ | ACQUIRED DISPOSED NAME OF BUSINESS ENTITY | - | ACQUIRED | |
| | Accenture | | Air Products &Chen | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | |
| | Consulting | | Chemicals | |
| | FAIR MARKET VALUE × \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 | ╳ \$10,001 - \$100,000◯ Over \$1,000,000 |
| | NATURE OF INVESTMENT Image: Stock Other | | NATURE OF INVESTMEN | |
| | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income | (Describe) Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DA | TE: |
| | | | <u> </u> | <u> </u> |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED |
| • | NAME OF BUSINESS ENTITY | Γ | ► NAME OF BUSINESS EN | |
| | | | American Electric P | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Services FAIR MARKET VALUE | | Energy FAIR MARKET VALUE | |
| | ▼ \$2,000 - \$10,000 \$10,001 - \$100,000 | | \$2,000 - \$10,000 | × \$10,001 - \$100,000 |
| | S100,001 - \$1,000,000 | | \$100,001 - \$1,000,000 | Over \$1,000,000 |
| | NATURE OF INVESTMENT X Stock Other | | NATURE OF INVESTMEN | |
| | (Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income | (Describe) Received of \$0 - \$499 Received of \$500 or More (Report on Schedule C) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DA | TE: |
| | 2323 | | 23 | <u> </u> |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED |

| | SCHEDULE A-1 CALIFORNIA FORM | | | |
|---|--|-------|--|--|
| | Inves | ments | FAIR POLITICAL PRACTICES COMMISSION | |
| | | | nd Other Interests is Less Than 10%) | Name |
| | | | ist be itemized. | Mark Fischer-Colbrie |
| | Do not attach brokerag | e | or financial statements. | |
| | NAME OF BUSINESS ENTITY | | NAME OF BUSINESS ENT | TITY |
| | American Tower | | Analog Devices | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Wireless Communications | | Integrated Circuits | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | |
| | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | × \$2,000 - \$10,000 \$100,001 - \$1,000,000 | S10,001 - \$100,000 |
| | NATURE OF INVESTMENT X Stock Other | | NATURE OF INVESTMEN | |
| | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income Income | (Describe) Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | |
| | / <u>23</u> / <u>23</u> ACQUIRED DISPOSED | | // <u>_23</u> ACQUIRED | // <u>23</u> DISPOSED |
| _ | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS ENT | - |
| | Amgen | | Ansa Bio | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Pharmaceuticals | | DNA Synthesis | |
| | FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 | ☐ \$10,001 - \$100,000 ☐ Over \$1,000,000 |
| | NATURE OF INVESTMENT X Stock Other | | NATURE OF INVESTMEN | |
| | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income Income | (Describe) Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | 'E: |
| | , , 23 , , , 23 | | , , 23 | / / 23 |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED |
| ► | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS ENT | TITY |
| | Amgen | | Apple | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Pharmaceutical | | Electronics | |
| | | | | |
| | \$2,000 - \$10,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | \$2,000 - \$10,000 \$100,001 - \$1,000,000 | ▶ \$10,001 - \$100,000○ Over \$1,000,000 |
| | NATURE OF INVESTMENT Stock Other (Describe) | | NATURE OF INVESTMEN | (Describe) |
| | Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C) | | Partnership O Income | |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | E: |
| | <u>//23</u> <u>//23</u> | | <u>23</u> | <u>/</u> /_23 |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED |

| SCHEDULE A-1 CALIFORNIA FORM 7 | |
|---|--|
| In | vestments FAIR POLITICAL PRACTICES COMMISSION |
| (Ownership Ir | Is, and Other Interests nterest is Less Than 10%) Mark Fischer-Colbrie |
| | ents must be itemized. |
| NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| Bank New York Mellon | Chevron |
| GENERAL DESCRIPTION OF THIS BUSINESS | GENERAL DESCRIPTION OF THIS BUSINESS |
| Financial Services | Energy |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| □ \$2,000 - \$10,000 × \$10,001 - \$100,000 | □ \$2,000 - \$10,000 ▼ \$10,001 - \$100,000 □ \$2,000 - \$10,000 ▼ \$10,001 - \$100,000 |
| S100,001 - \$1,000,000 Over \$1,000,000 | \$100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT X Stock Other | |
| (Describe) | Stock Other (Describe) |
| Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedu | ule C) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| 2323 | |
| | |
| NAME OF BUSINESS ENTITY Becton Dickinson | NAME OF BUSINESS ENTITY Chubb |
| GENERAL DESCRIPTION OF THIS BUSINESS | GENERAL DESCRIPTION OF THIS BUSINESS |
| Instruments | Insurance |
| FAIR MARKET VALUE | FAIR MARKET VALUE |
| \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT X Other (Describe) | NATURE OF INVESTMENT Stock □ (Describe) |
| Partnership (Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedu | Partnership O Income Received of \$0 - \$499 |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| <u>/ 23</u> <u>/ 23</u> | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY |
| Blackrock | Cisco Systems |
| GENERAL DESCRIPTION OF THIS BUSINESS | GENERAL DESCRIPTION OF THIS BUSINESS |
| Financial | Internet Equipment |
| | FAIR MARKET VALUE \$2,000 - \$10,000 \$2,000 \$10,000 |
| \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | ↓ \$2,000 - \$10,000 × \$10,001 - \$100,000 ↓ \$100,001 - \$1,000,000 Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Clescribe) Partnership () Income Received of \$0 - \$499 | |
| Income Received of \$500 or More (Report on Schedul) Income Received of \$500 or More (Report on Schedul) | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: |
| | <u>//23</u> <u>//23</u> |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED |

| SCHEDULE A-1 CALIFORNIA FORM | | |
|--|--|--|
| | TIMENTS FAIR POLITICAL PRACTICES COMMISSION | |
| (Ownership Interes | nd Other Interests st is Less Than 10%) Mark Fischer-Colbrie | |
| | nust be itemized. | |
| NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY | |
| Clorox | Comcast | |
| GENERAL DESCRIPTION OF THIS BUSINESS | GENERAL DESCRIPTION OF THIS BUSINESS | |
| Chemicals | Communications | |
| FAIR MARKET VALUE | FAIR MARKET VALUE | |
| \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | |
| NATURE OF INVESTMENT X Stock Other | NATURE OF INVESTMENT X Stock Other | |
| (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | (Describe) ☐ Partnership ◯ Income Received of \$0 - \$499 ◯ Income Received of \$500 or More (<i>Report on Schedule C</i>) | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: | |
| <u>/</u> | <u>//23</u> <u>//23</u> ACQUIREDDISPOSED | |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY | |
| Colgate-Palmolive | Costco | |
| GENERAL DESCRIPTION OF THIS BUSINESS | GENERAL DESCRIPTION OF THIS BUSINESS | |
| Consumer | Retail | |
| FAIR MARKET VALUE × \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | FAIR MARKET VALUE × \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | |
| NATURE OF INVESTMENT X Stock Other | NATURE OF INVESTMENT Stock Other | |
| (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: | |
| <u>/ 23</u> <u>/ 23</u> | <u>//23</u> <u>//23</u> | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED | |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY | |
| Comcast | Emerson Electric | |
| GENERAL DESCRIPTION OF THIS BUSINESS | GENERAL DESCRIPTION OF THIS BUSINESS | |
| Internet services | Electronics | |
| FAIR MARKET VALUE | FAIR MARKET VALUE | |
| \$2,000 - \$10,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 | \$2,000 - \$10,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | |
| NATURE OF INVESTMENT Image: Stock Other (Describe) | NATURE OF INVESTMENT X Stock Other (Describe) | |
| Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (<i>Report on Schedule C</i>) | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (<i>Report on Schedule C</i>) | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: | |
| <u>/23</u> <u>/23</u> ACQUIRED DISPOSED | <u>//23</u> <u>//23</u> ACQUIREDDISPOSED | |
| | | |

| | SCHEDULE A-1 CALIFORNIA FORM 7 | | | | |
|---|--|----|---|--|--|
| | Inves | tn | nents | FAIR POLITICAL PRACTICES COMMISSION | |
| | Stocks, Bonds, a | | | Name | |
| | (Ownership Interes Investments m | | , | Mark Fischer-Colbrie | |
| | Do not attach brokerag | | | | |
| ► | NAME OF BUSINESS ENTITY | Γ | ► NAME OF BUSINESS ENT | TTY | |
| | Eversource Energy | | Home Depot | | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS | |
| | Energy | | Retail | | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | | |
| | × \$2,000 - \$10,000 | | \$2,000 - \$10,000 | × \$10,001 - \$100,000 | |
| | S100,001 - \$1,000,000 Over \$1,000,000 | | \$100,001 - \$1,000,000 | Over \$1,000,000 | |
| | | | | r | |
| | Stock Other (Describe) | | X Stock Other | (Describe) | |
| | Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income I | Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) | |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | E: | |
| | / <u>23</u> / <u>23</u> ACQUIREDDISPOSED | | | // <u>23</u> DISPOSED | |
| _ | NAME OF BUSINESS ENTITY | | ACQUIRED | | |
| - | General Dynamics | | Illinois Tool Works | 11 T | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS | |
| | Defense | | Tooling | | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | | |
| | × \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | \$2,000 - \$10,000 \$100,001 - \$1,000,000 | ✗ \$10,001 - \$100,000☑ Over \$1,000,000 | |
| | NATURE OF INVESTMENT X Stock Other | | NATURE OF INVESTMENT | | |
| | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income I O Income I | (Describe) Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) | |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | E: | |
| | | | 23 | // 23 | |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED | |
| ► | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS ENT | ITY | |
| | Grainger | | Johnson & Johnson | | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS | |
| | Indsutrial Supplies | | Pharmaceutical | | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | | |
| | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | × \$2,000 - \$10,000 \$100,001 - \$1,000,000 | └── \$10,001 - \$100,000 └── Over \$1,000,000 | |
| | NATURE OF INVESTMENT | | NATURE OF INVESTMENT | | |
| | Stock Other (Describe) | | Stock Other | (Describe) | |
| | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income I O Income I | , | |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | E: | |
| | 2323 | | 23 | | |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED | |

| | SCHED Invest | _ | |
|---|--|--------|--|
| | Stocks, Bonds, a | n | d Other Interests Name |
| | (Ownership Interes | | Mark Fischer-Colbrie |
| | Investments m Do not attach brokerage | | |
| • | NAME OF BUSINESS ENTITY | ן ו | ► NAME OF BUSINESS ENTITY |
| | JP Morgan Chase | | Lamar Advertising |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION OF THIS BUSINESS |
| | Financial Services | | Advertising |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE |
| | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 |
| | NATURE OF INVESTMENT Image: Stock Other (Describe) | | NATURE OF INVESTMENT Stock Other (Describe) |
| | (Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) | | (Describe) Partnership () Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DATE: |
| | <u>/23</u> <u>/23</u> ACQUIRED DISPOSED | | / <u>/ 23</u> / <u>/ 23</u> ACQUIRED DISPOSED |
| • | NAME OF BUSINESS ENTITY | ľ | ► NAME OF BUSINESS ENTITY |
| | L3 Harris | | Linde PLC |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION OF THIS BUSINESS |
| | Defense | | Energy |
| | FAIR MARKET VALUE × \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | FAIR MARKET VALUE X \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 |
| | NATURE OF INVESTMENT X Stock Other | | NATURE OF INVESTMENT Stock Other |
| | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | (Describe) Partnership ◯ Income Received of \$0 - \$499 ◯ Income Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DATE: |
| | <u>/ 23</u> <u>/ 23</u> ACQUIREDDISPOSED | | / <u>/ 23</u> / <u>/ 23</u> ACQUIRED DISPOSED |
| • | NAME OF BUSINESS ENTITY | ľ | ► NAME OF BUSINESS ENTITY |
| | Eversource | | Lockheed Martin |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION OF THIS BUSINESS |
| | Energy | | Defense |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE |
| | X \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | \$2,000 - \$10,000 \$10,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 |
| | NATURE OF INVESTMENT Stock Other (Describe) | | NATURE OF INVESTMENT Stock Other (Describe) |
| | (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) | | (Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DATE: |
| | / <u>/ 23</u> / <u>/ 23</u> ACQUIRED/ DISPOSED | | / <u>/ 23</u> / <u>/ 23</u> ACQUIRED/ DISPOSED |
| | I | • | |

| | SCHEDULE A-1 CALIFORNIA FORM 7 | | | |
|---|--|-------|---|--|
| | Inves | nents | FAIR POLITICAL PRACTICES COMMISSION | |
| | Stocks, Bonds, a Ownership Interes | t is | s Less Than 10%) | Name Mark Fischer-Colbrie |
| | Investments m Do not attach brokerag | | | |
| ► | NAME OF BUSINESS ENTITY | Г | ► NAME OF BUSINESS ENT | ΓΙΤΥ |
| | Lowe's | | Microsoft | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Hardware | | Software | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | |
| | X \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | \$2,000 - \$10,000 \$100,001 - \$1,000,000 | ✗ \$10,001 - \$100,000☐ Over \$1,000,000 |
| | | | | г |
| | X Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C) | | X Stock ☐ Other _ Partnership ○ Income ○ Income | (Describe) Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | 'E: |
| | 2323 | | 23 | |
| _ | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED |
| ► | | | NAME OF BUSINESS ENT National Datail | ΓΙΤΥ |
| | McDonald's GENERAL DESCRIPTION OF THIS BUSINESS | | National Retail GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Food | | Retail | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | |
| | Image: State of the state | | \$2,000 - \$10,000 \$100,001 - \$1,000,000 | × \$10,001 - \$100,000 Over \$1,000,000 |
| | NATURE OF INVESTMENT Stock Other (Describe) | | NATURE OF INVESTMEN | T (Describe) |
| | Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income | |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | 'E: |
| | 2323 | | 23 | |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED |
| ► | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS ENT | ΓΙΤΥ |
| | Medtronic | | Nextera Energy | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Medical Devices | | Energy | |
| | FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 | | FAIR MARKET VALUE \$2,000 - \$10,000 | \$10,001 - \$100,000 |
| | \$100,001 - \$1,000,000 0ver \$1,000,000 | | \$100,001 - \$1,000,000 | Over \$1,000,000 |
| | NATURE OF INVESTMENT | | NATURE OF INVESTMEN | г |
| | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership ◯ Income | (Describe) Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | 'E: |
| | 23 23 | | 23 | |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED |

| | SCHEDULE A-1 CALIFORNIA FORM | | |
|---|--|---|--|
| | Invest | ments FAIR POLITICAL PRACTICES COMMISSION | |
| | | | d Other Interests Name |
| | · · · | | is Less Than 10%) Ist be itemized. |
| | Do not attach brokerage | | |
| ► | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS ENTITY |
| | Nike | | People's United Financial (Now M&T Bank) |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION OF THIS BUSINESS |
| | Clothing | | Financial Services |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE |
| | × \$2,000 - \$10,000 | | Statistics = 10,000 Statistics = 10,000 Statistics = 10,000 Statistics = 10,000 |
| | S100,001 - \$1,000,000 | | \$100,001 - \$1,000,000 Over \$1,000,000 |
| | NATURE OF INVESTMENT | | NATURE OF INVESTMENT |
| | X Stock Other (Describe) | | X Stock Other(Describe) |
| | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DATE: |
| | / <u>/23</u> / <u>/23</u> | | |
| | ACQUIRED DISPOSED | | ACQUIRED DISPOSED |
| | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS ENTITY |
| | Norfolk Southern | | Pepsico GENERAL DESCRIPTION OF THIS BUSINESS |
| | GENERAL DESCRIPTION OF THIS BUSINESS Transportation | | Beverages |
| | | | |
| | FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 | | FAIR MARKET VALUE X \$2,000 - \$10,000 \$10,001 - \$100,000 |
| | \$100,001 - \$1,000,000 Over \$1,000,000 | | \$100,001 - \$1,000,000 \$100,000 |
| | NATURE OF INVESTMENT Stock Other | | NATURE OF INVESTMENT X Stock Other |
| | □ (Describe) □ Partnership ◯ Income Received of \$0 - \$499 | | (Describe) ☐ Partnership ◯ Income Received of \$0 - \$499 |
| | Income Received of \$500 or More (Report on Schedule C) | | Income Received of \$500 or More (Report on Schedule C) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DATE: |
| | / / 23 / / 23 | | / / 23 / / 23 |
| | ACQUIRED DISPOSED | | ACQUIRED DISPOSED |
| • | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS ENTITY |
| | Paychex | | Pfizer |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION OF THIS BUSINESS |
| | Financial | | Pharmaceuticals |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE |
| | ▼ \$2,000 - \$10,000 □ \$10,001 - \$100,000 □ \$100,001 - \$1,000,000 □ \$100,000 | | X \$2,000 - \$10,000 S \$10,001 - \$100,000 |
| | S100,001 - \$1,000,000 Over \$1,000,000 | | S100,001 - \$1,000,000 Over \$1,000,000 |
| | NATURE OF INVESTMENT X Stock Other (Describe) | | NATURE OF INVESTMENT X Stock Other (Describe) |
| | Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DATE: |
| | <u>/ 23</u> <u>/ 23</u> | | 2323 |
| | ACQUIRED DISPOSED | | ACQUIRED DISPOSED |

| | SCHEDULE A-1 | | CALIFORNIA FORM 700 | |
|---|--|-------|--|--|
| | Inves | ments | FAIR POLITICAL PRACTICES COMMISSION | |
| | (Ownership Interes | st | nd Other Interests is Less Than 10%) | |
| | | | ist be itemized. or financial statements. | |
| | NAME OF BUSINESS ENTITY | Ē | NAME OF BUSINESS EN | |
| | S&P Global | | PPG Industries | |
| | | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | | | | |
| | Finncial Services | | Paints FAIR MARKET VALUE | |
| | × \$2,000 - \$10,000 \$10,001 - \$100,000 | | × \$2,000 - \$10,000 | \$10,001 - \$100,000 |
| | S100,001 - \$1,000,000 Over \$1,000,000 | | \$100,001 - \$1,000,000 | Over \$1,000,000 |
| | NATURE OF INVESTMENT | | NATURE OF INVESTMEN | г |
| | X Stock Other | | X Stock Other | (Describe) |
| | Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (Report on Schedule C) | | Partnership O Income | · · · · · · · · · · · · · · · · · · · |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | 'E: |
| | <u>09 / 25 / 23</u> / _ / <u>23</u> ACQUIRED DISPOSED | | / <u>/ 23</u> | // <u>23</u> DISPOSED |
| • | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS EN | |
| | Phillips 66 | | Procter &Gamble | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Energy | | Retail | |
| | FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 | ✗ \$10,001 - \$100,000☑ Over \$1,000,000 |
| | NATURE OF INVESTMENT X Stock Other | | NATURE OF INVESTMEN | |
| | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income Income | (Describe) Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | E: |
| | / <u>23</u> / <u>23</u> ACQUIRED DISPOSED | | <u>//23</u> | //_23 DISPOSED |
| ► | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS EN | ΓΙΤΥ |
| | PNC Financial Services | | Raytheon | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Energy | | Defense | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | |
| | \$2,000 - \$10,000 ➤ \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | × \$2,000 - \$10,000 \$100,001 - \$1,000,000 | └── \$10,001 - \$100,000 └── Over \$1,000,000 |
| | | | NATURE OF INVESTMEN | |
| | X Stock Other (Describe) | | Stock Other | (Describe) |
| | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) | | Partnership O Income | Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | E: |
| | //_23//_23 ACQUIREDDISPOSED | | //_23 | / <u>23</u> DISPOSED |
| | | 1 | I | |

| SCHEDULE A-1 CALIFORNIA FORM 70 | | | | | |
|--|--|--|--|--|--|
| Investments Fair Political Practices commis | | | | | |
| Stocks, Bonds, and Other Interests Name | | | | | |
| | st is Less Than 10%) nust be itemized. | | | | |
| | ge or financial statements. | | | | |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY | | | | |
| Strateos, Inc. | | | | | |
| GENERAL DESCRIPTION OF THIS BUSINESS | GENERAL DESCRIPTION OF THIS BUSINESS | | | | |
| Software / BioAssay Testing | | | | | |
| | | | | | |
| \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | | | |
| NATURE OF INVESTMENT Stock Stock option grant (Describe) | NATURE OF INVESTMENT Stock Other (Describe) | | | | |
| Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) | Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (<i>Report on Schedule C</i>) | | | | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: | | | | |
| <u>/ 23</u> <u>/ 23</u> | <u>//23</u> <u>//23</u> | | | | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED | | | | |
| NAME OF BUSINESS ENTITY Terret | ► NAME OF BUSINESS ENTITY | | | | |
| Target GENERAL DESCRIPTION OF THIS BUSINESS | US Bancorp GENERAL DESCRIPTION OF THIS BUSINESS | | | | |
| Retailer | Financial Services | | | | |
| FAIR MARKET VALUE | FAIR MARKET VALUE | | | | |
| \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | | | |
| NATURE OF INVESTMENT X Stock | NATURE OF INVESTMENT X Stock Other | | | | |
| | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | | | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: | | | | |
| 2323_ | 2308_/28_/23_ | | | | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED | | | | |
| ► NAME OF BUSINESS ENTITY | ► NAME OF BUSINESS ENTITY | | | | |
| United Health Group | Walmart | | | | |
| GENERAL DESCRIPTION OF THIS BUSINESS | GENERAL DESCRIPTION OF THIS BUSINESS | | | | |
| Health Care | Retail | | | | |
| | | | | | |
| \$2,000 - \$10,000 ➤ \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | \$2,000 - \$10,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | | | |
| NATURE OF INVESTMENT X Stock | NATURE OF INVESTMENT Stock Other | | | | |
| (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | (Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | | | |
| IF APPLICABLE, LIST DATE: | IF APPLICABLE, LIST DATE: | | | | |
| 2323 | | | | | |
| ACQUIRED DISPOSED | ACQUIRED DISPOSED | | | | |

| | SCHED | U | ILE A-1 | CALIFORNIA FORM 700 |
|---|--|-----|---|--|
| | Inves | tn | nents | FAIR POLITICAL PRACTICES COMMISSION |
| | Stocks, Bonds, a | | | Name |
| | (Ownership Interes Investments m | | , | Mark Fischer-Colbrie |
| | Do not attach brokerag | | | |
| ► | NAME OF BUSINESS ENTITY | 1 [| ► NAME OF BUSINESS ENT | ITY |
| | Watsco Inc. | | | |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Air conditioning / heating FAIR MARKET VALUE | | FAIR MARKET VALUE | |
| | \$2,000 - \$10,000 | | S2,000 - \$10,000 | \$10,001 - \$100,000 |
| | S100,001 - \$1,000,000 | | \$100,001 - \$1,000,000 | Over \$1,000,000 |
| | | | | |
| | Stock Other (Describe) | | Stock Other | (Describe) |
| | Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income I | Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | E: |
| | | | | <u> </u> |
| _ | ACQUIRED DISPOSED | ╎╷ | ACQUIRED | DISPOSED |
| | NAME OF BUSINESS ENTITY WEC Energy | | ► NAME OF BUSINESS ENT | ΠY |
| | GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Energy | | | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | |
| | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | \$2,000 - \$10,000 \$100,001 - \$1,000,000 | S10,001 - \$100,000 |
| | NATURE OF INVESTMENT X Stock Other | | NATURE OF INVESTMENT | |
| | (Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income F | (Describe) Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | E: |
| | 2323 | | 23 | <u> </u> |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED |
| ► | NAME OF BUSINESS ENTITY | | ► NAME OF BUSINESS ENT | ITY |
| | XCEL Energy GENERAL DESCRIPTION OF THIS BUSINESS | | GENERAL DESCRIPTION | OF THIS BUSINESS |
| | Energy | | | |
| | FAIR MARKET VALUE | | FAIR MARKET VALUE | |
| | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 | | \$2,000 - \$10,000 \$100,001 - \$1,000,000 | \$10,001 - \$100,000 Over \$1,000,000 |
| | NATURE OF INVESTMENT X Stock Other | | NATURE OF INVESTMENT | |
| | (Describe) ☐ Partnership ◯ Income Received of \$0 - \$499 ◯ Income Received of \$500 or More (<i>Report on Schedule C</i>) | | Partnership O Income I O Income I | (Describe) Received of \$0 - \$499 Received of \$500 or More (<i>Report on Schedule C</i>) |
| | IF APPLICABLE, LIST DATE: | | IF APPLICABLE, LIST DAT | E: |
| | <u>/ 23</u> <u>/ 23</u> | | | <u> </u> |
| | ACQUIRED DISPOSED | | ACQUIRED | DISPOSED |

| Co | mn | nen | its: |
|----|----|-----|------|
|----|----|-----|------|

SCHEDULE B Interests in Real Property

(Including Rental Income)

CALIFORNIA FORM 700

Name

Mark Fischer-Colbrie

| ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS | ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS |
|---|---|
| 316-13-021 | |
| CITY | CITY |
| Santa Clara | |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 |
| NATURE OF INTEREST | NATURE OF INTEREST |
| X Ownership/Deed of Trust | Ownership/Deed of Trust |
| Leasehold Dther | Leasehold Due to the the temperature of |
| IF RENTAL PROPERTY, GROSS INCOME RECEIVED | IF RENTAL PROPERTY, GROSS INCOME RECEIVED |
| \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 | \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 |
| | |
| 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 Yvonne Shevnin | 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. |

* You are not required to report loans from a commercial lending institution 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* | NAME OF LENDER* | |
|---|---|--|
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) | |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | BUSINESS ACTIVITY, IF ANY, OF LENDER | |
| INTEREST RATE TERM (Months/Years) | INTEREST RATE TERM (Months/Years) | |
| % None | % None | |
| HIGHEST BALANCE DURING REPORTING PERIOD | HIGHEST BALANCE DURING REPORTING PERIOD | |
| ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 | \$500 - \$1,000 \$1,001 - \$10,000 | |
| S10,001 - \$100,000 OVER \$100,000 | S10,001 - \$100,000 OVER \$100,000 | |
| Guarantor, if applicable | Guarantor, if applicable | |

Comments:

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Mark Fischer-Colbrie

| ► 1. INCOME RECEIVED | ► 1. INCOME RECEIVED |
|--|--|
| NAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME |
| State of California State Controller | Strateos, Inc. |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 888 S. Figueroa St. Suite 2080 | 3565 Haven Ave Menlo Park CA 94025 |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| CIRM oversight | Software / BioAssay Testing |
| YOUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| ICOC Grants Working Group & Board Member | President, CEO |
| GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$1,001 - \$10,000 ★ \$10,001 - \$100,000 OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) Partnership (Less than 10% ownership, For 10% or greater use | GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$10,001 - \$100,000 \$10,001 - \$100,000 OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) Partnership (Less than 10% ownership. For 10% or greater use |
| Schedule A-2.) Sale of | Schedule A-2.) Sale of |
| Commission or Rental Income, list each source of \$10,000 or more | Commission or Rental Income, list each source of \$10,000 or more |
| (Describe) | (Describe) |
| X Other Review and meeting fees (Describe) | Other (Describe) |

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, 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* | INTEREST RATE | TERM (Months/Years) |
|--|-------------------|---------------------|
| ADDRESS (Business Address Acceptable) | % [] N | lone |
| BUSINESS ACTIVITY, IF ANY, OF LENDER | SECURITY FOR LOAN | Personal residence |
| HIGHEST BALANCE DURING REPORTING PERIOD | Real Property | Street address |
| \$ 500 - \$1,000 | | City |
| <pre>\$1,001 - \$10,000</pre> \$10,001 - \$100,000 | Guarantor | |
| OVER \$100,000 | Other | (Describe) |
| Comments: | | |