

187

**CALIFORNIA FORM 700**  
**FAIR POLITICAL PRACTICES COMMISSION**  
**A PUBLIC DOCUMENT**

**STATEMENT OF ECONOMIC INTERESTS**

Date Received  
 Official Use Only

**COVER PAGE**

**MAR 18 2013**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
 GOLDBERG MICHAEL D.

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

Agency Name

CIRM

Division, Board, Department, District, if applicable

Your Position

ICOC MEMBER

► If filing for multiple positions, list below or on an attachment.

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

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

- ☒ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)  
☐ Multi-County \_\_\_\_\_ ☐ County of \_\_\_\_\_  
☐ City of \_\_\_\_\_ ☐ Other \_\_\_\_\_

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

- ☒ **Annual:** The period covered is January 1, 2012, through December 31, 2012.  
 -or-  
 The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2012.  
☐ **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
 (Check one)  
☐ The period covered is January 1, 2012, through the date of leaving office.  
☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.  
☐ **Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  
☐ **Candidate:** Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 7

- ☒ **Schedule A-1 - Investments** – schedule attached ☒ **Schedule C - Income, Loans, & Business Positions** – schedule attached  
☐ **Schedule A-2 - Investments** – schedule attached ☐ **Schedule D - Income – Gifts** – schedule attached  
☐ **Schedule B - Real Property** – schedule attached ☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-

☐ **None - No reportable interests on any schedule**

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
 (Business or Agency Address Recommended - Public Document)  
 2995 WOODSIDE RD SUITE 400 WOODSIDE CA 0  
 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)  
 ( 650 ) 906-4450 MGOLDBERG@GMAIL.COM

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 03/14/2013  
 (month, day, year)

Signature \_\_\_\_\_  
 (File the originally signed statement with your filing official.)

207

**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

GOLDBERG

▶ NAME OF BUSINESS ENTITY  
**FFT PARTNERS**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

**PRIVATE EQUITY PARTNERSHIP**

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT **PARTNERSHIP INTEREST**  
☐ Stock ☒ Other (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12 \_\_\_\_/\_\_\_\_/12  
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY  
**SKYLINE VENTURES**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

**PRIVATE EQUITY PARTNERSHIP**

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT **PARTNERSHIP INTEREST**  
☐ Stock ☒ Other (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12 \_\_\_\_/\_\_\_\_/12  
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY  
**INSURANCE PARTNERS II**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

**PRIVATE EQUITY PARTNERSHIP**

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT **PARTNERSHIP INTEREST**  
☐ Stock ☒ Other (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12 \_\_\_\_/\_\_\_\_/12  
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY  
**SKYLINE VENTURES II**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

**PRIVATE EQUITY PARTNERSHIP**

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT **PARTNERSHIP INTEREST**  
☐ Stock ☒ Other (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12 \_\_\_\_/\_\_\_\_/12  
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY  
**INTEGRAL CAPITAL PARTNERS**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

**PRIVATE EQUITY PARTNERSHIP**

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 Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12 12/31/12  
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY  
**CHEZ HOWIE**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

**RESTAURANT**

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 Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/12 12/31/12  
 ACQUIRED DISPOSED

Comments:

307

# 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

GOLDBERG

NAME OF BUSINESS ENTITY  
**EHEALTH INC**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**INSURANCE SERVICES**

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 Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **12**      \_\_\_\_\_ / \_\_\_\_\_ / **12**  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**BIDSHIFT**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**HEALTHCARE SOFTWARE**

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 Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **12**      **12** / **31** / **12**  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**GENOMIC HEALTH**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**GENOMIC ASSAYS**

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 Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **12**      \_\_\_\_\_ / \_\_\_\_\_ / **12**  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**HANSEN MEDICAL**

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)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **12**      **12** / **31** / **12**  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**BRISTOL MYERS SQUIBB**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**PHARMACEUTICALS**

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 Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **12**      \_\_\_\_\_ / \_\_\_\_\_ / **12**  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**XENOPORT**

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)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **12**      **12** / **31** / **12**  
 ACQUIRED      DISPOSED

Comments:

4567

# 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

GOLDBERG

NAME OF BUSINESS ENTITY  
**NUVASSIVE**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**MEDICAL DEVICES**

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 Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**KPCB ZAIBATSU FUND**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**PRIVATE EQUITY PARTNERSHIP**

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 **PARTNERSHIP INTEREST** \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**IVIVI TECHNOLOGIES**

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)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**KPCB VIII**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**PRIVATE EQUITY PARTNERSHIP**

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 **PARTNERSHIP INTEREST** \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**KPCB IV**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**PRIVATE EQUITY PARTNEERSHIP**

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

NATURE OF INVESTMENT **PARTNERSHIP INTEREST**  
☐ Stock      ☒ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**KPCB X**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**PRIVATE EQUITY PARTNERSHIP**

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

NATURE OF INVESTMENT **PARTNERSHIP INTEREST**  
☐ Stock      ☒ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

Comments:

527

**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

GOLDBERG

<p>► NAME OF BUSINESS ENTITY <b>KPCB XI</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>PRIVATE EQUITY PARTNERSHIP</b></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input checked="" type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <b>PARTNERSHIP INTEREST</b>  <input type="checkbox"/> Stock      <input checked="" type="checkbox"/> Other (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE:  ____/____/12      ____/____/12  ACQUIRED      DISPOSED </p>	<p>► NAME OF BUSINESS ENTITY <b>MDV VIII</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>PRIVATE EQUITY PARTNERSHIP</b></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <b>PARTNERSHIP INTEREST</b>  <input type="checkbox"/> Stock      <input checked="" type="checkbox"/> Other (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE:  ____/____/12      ____/____/12  ACQUIRED      DISPOSED </p>
<p>► NAME OF BUSINESS ENTITY <b>MAKENA CAPITAL</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>ASSETT MANAGER</b></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input checked="" type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <b>PARTNERSHIP INTEREST</b>  <input type="checkbox"/> Stock      <input checked="" type="checkbox"/> Other (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE:  ____/____/12      ____/____/12  ACQUIRED      DISPOSED </p>	<p>► NAME OF BUSINESS ENTITY <b>MDV IX</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>PRIVATE EQUITY PARTNERSHIP</b></p> <p>FAIR MARKET VALUE  <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <b>PARTNERSHIP INTERSET</b>  <input type="checkbox"/> Stock      <input checked="" type="checkbox"/> Other (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE:  ____/____/12      ____/____/12  ACQUIRED      DISPOSED </p>
<p>► NAME OF BUSINESS ENTITY <b>FORT BAKER RETREAT GROUP</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>REAL ESTAE PARTNERSHIP</b></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input checked="" type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <b>PARTNERSHIP INTEREST</b>  <input type="checkbox"/> Stock      <input checked="" type="checkbox"/> Other (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE:  ____/____/12      ____/____/12  ACQUIRED      DISPOSED </p>	<p>► NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT  <input type="checkbox"/> Stock      <input type="checkbox"/> Other (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE:  ____/____/12      ____/____/12  ACQUIRED      DISPOSED </p>

Comments:



7 of 7

# SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
 Name  
Goldberg

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>XDX, Inc</u> ADDRESS (Business Address Acceptable) <u>3260 Bayshore Blvd, Brisbane, CA</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Biotechnology</u> YOUR BUSINESS POSITION <u>Chairman of Board of Directors</u> GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input checked="" type="checkbox"/> Other <u>Board Fees</u> <small>(Describe)</small>	NAME OF SOURCE OF INCOME _____ ADDRESS (Business Address Acceptable) _____ BUSINESS ACTIVITY, IF ANY, OF SOURCE _____ YOUR BUSINESS POSITION _____ GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from commercial lending institutions, 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* _____ ADDRESS (Business Address Acceptable) _____ BUSINESS ACTIVITY, IF ANY, OF LENDER _____ HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	INTEREST RATE _____% <input type="checkbox"/> None TERM (Months/Years) _____ SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small style="margin-left: 600px;">Street address</small> _____ <small style="margin-left: 600px;">City</small> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <small style="margin-left: 600px;">(Describe)</small>
---	---

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