

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A Public Document

 Date Initial Filing Received
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Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Dilles, Jack			

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Scotts Valley

Division, Board, Department, District, if applicable

Your Position

Legislative

City Council Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

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

- | | |
|--|--|
| <input type="checkbox"/> State | <input type="checkbox"/> Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) |
| <input type="checkbox"/> Multi-County _____ | <input type="checkbox"/> County of _____ |
| <input checked="" type="checkbox"/> City of <u>Scotts Valley</u> | <input type="checkbox"/> Other _____ |

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Annual: The period covered is January 1, 2021 through December 31, 2021. | <input type="checkbox"/> Leaving Office: Date Left ____/____/____
(Check one circle) |
| -or- | <input type="checkbox"/> The period covered is January 1, 2021 through the date of leaving office. |
| The period covered is ____/____/____, through December 31, 2021. | <input type="checkbox"/> The period covered is ____/____/____, through the date of leaving office. |
| <input type="checkbox"/> Assuming Office: Date assumed ____/____/____ | |
| <input type="checkbox"/> Candidate: Date of Election _____ and office sought, if different than Part 1: _____ | |

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 6
Schedules attached

- | | |
|---|--|
| <input type="checkbox"/> Schedule A-1 - Investments – schedule attached | <input type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached |
| <input checked="" type="checkbox"/> Schedule A-2 - Investments – schedule attached | <input type="checkbox"/> Schedule D - Income – Gifts – schedule attached |
| <input checked="" type="checkbox"/> Schedule B - Real Property – schedule attached | <input type="checkbox"/> 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
<i>(Business or Agency Address Recommended Public Document)</i>				
[REDACTED]		Scotts Valley	CA	95066
DAYTIME TELEPHONE NUMBER	E MAIL ADDRESS			
([REDACTED]) [REDACTED]	jdilles@scottsvally.org			

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 04/05/2022
 (month, day, year)

 Signature Jack Dilles
 (File the originally signed paper statement with your filing official.)

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM	700
<small>FAIR POLITICAL PRACTICES COMMISSION</small>	
Name	
Dilles, Jack	

▶ 1. BUSINESS ENTITY OR TRUST

John and Lisa Dilles Family Trust
 Name
 P O Box 66123
 Scotts Valley, CA 95067
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS			
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:		
<input type="checkbox"/> \$0 \$1,999			
<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			
NATURE OF INVESTMENT			
<input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> _____ Other			
YOUR BUSINESS POSITION _____			

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 \$499 \$10,001 \$100,000
 \$500 \$1,000 OVER \$100,000
 \$1,001 \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

123 Peyton Street, Santa Cruz, CA 95060
 Name of Business Entity, if Investment, or
 Assessor's Parcel Number or Street Address of Real Property
 Residential Rental
 Description of Business Activity or
 City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 \$10,000	
<input type="checkbox"/> \$10,001 \$100,000	
<input type="checkbox"/> \$100,001 \$1,000,000	
<input checked="" type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Dilles Government Finance Consulting (aka Dilles Finance Consulting)
 Name
 P O Box 66123
 Scotts Valley, CA 95067
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS			
Financial & administrative consulting			
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:		
<input checked="" type="checkbox"/> \$0 \$1,999			
<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			
NATURE OF INVESTMENT			
<input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> _____ Other			
YOUR BUSINESS POSITION <u>Owner</u>			

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 \$499 \$10,001 \$100,000
 \$500 \$1,000 OVER \$100,000
 \$1,001 \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

_____ Name of Business Entity, if Investment, or
 Assessor's Parcel Number or Street Address of Real Property

_____ Description of Business Activity or
 City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<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	

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

Comments: See Attached.

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM	700
<small>FAIR POLITICAL PRACTICES COMMISSION</small>	
Name	
Dilles, Jack	

▶ 1. BUSINESS ENTITY OR TRUST

John Leslie Dilles
 Name
 P O Box 66123
 Scotts Valley, CA 95067
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
 Real Estate Brokerage

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input checked="" type="checkbox"/> \$0 \$1,999	____/____/21 ____/____/21
<input type="checkbox"/> \$2,000 \$10,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$10,001 \$100,000	
<input type="checkbox"/> \$100,001 \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION Broker/Owner

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 \$499 \$10,001 \$100,000
 \$500 \$1,000 OVER \$100,000
 \$1,001 \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or
 Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
 City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 \$10,000	____/____/21 ____/____/21
<input type="checkbox"/> \$10,001 \$100,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$100,001 \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Name
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 \$1,999	____/____/21 ____/____/21
<input type="checkbox"/> \$2,000 \$10,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$10,001 \$100,000	
<input type="checkbox"/> \$100,001 \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 \$499 \$10,001 \$100,000
 \$500 \$1,000 OVER \$100,000
 \$1,001 \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or
 Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
 City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 \$10,000	____/____/21 ____/____/21
<input type="checkbox"/> \$10,001 \$100,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$100,001 \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

Comments: See Attached.

Schedule A-2 comment:

Note that filer previously filed the same information for the same period with the City of Scotts Valley previous form 700 filing system at <https://form700.fppc.ca.gov/> This entire form 700 is being filed again at this time only to meet the City's current filing requirements.

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 123 Peyton Street
 CITY
 Santa Cruz
 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 \$10,000
 \$10,001 \$100,000
 \$100,001 \$1,000,000
 Over \$1,000,000
 IF APPLICABLE, LIST DATE: / /21 / /21
 ACQUIRED DISPOSED
 NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ _____
 Yrs. remaining Other
 IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$0 \$499 \$500 \$1,000 \$1,001 \$10,000
 \$10,001 \$100,000 OVER \$100,000
 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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

 CITY

 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 \$10,000
 \$10,001 \$100,000
 \$100,001 \$1,000,000
 Over \$1,000,000
 IF APPLICABLE, LIST DATE: / /21 / /21
 ACQUIRED DISPOSED
 NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ _____
 Yrs. remaining Other
 IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$0 \$499 \$500 \$1,000 \$1,001 \$10,000
 \$10,001 \$100,000 OVER \$100,000
 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

* 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*

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF LENDER

 INTEREST RATE TERM (Months/Years)
 _____% None _____
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 \$1,000 \$1,001 \$10,000
 \$10,001 \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER*

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF LENDER

 INTEREST RATE TERM (Months/Years)
 _____% None _____
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 \$1,000 \$1,001 \$10,000
 \$10,001 \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: See Attached.

Schedule B comment:

Note that filer previously filed the same information for the same period with the City of Scotts Valley previous form 700 filing system at <https://form700.fppc.ca.gov/> This entire form 700 is being filed again at this time only to meet the City's current filing requirements.