

COVER PAGE

A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) Roberts (FIRST) Michael (MIDDLE) Sean

1. Office, Agency, or Court

Agency Name (Do not use acronyms) Under Construction Educational Network Board Vice President
Division, Board, Department, District, if applicable Your Position

► 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)

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other Non-Profit Board

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

- Annual: The period covered is January 1, 2018, through December 31, 2018.
- or-
- The period covered is ____/____/____, through December 31, 2018.
- Assuming Office: Date assumed ____/____/____
- Candidate: Date of Election _____ and office sought, if different than Part 1: _____
- Leaving Office: Date Left ____/____/____ (Check one circle.)
- The period covered is January 1, 2018, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.

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

Schedules attached

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - 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)
1135 Westridge Pkwy Salinas CA 93907

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(831) 424-9003

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 1-23-19
(month, day, year)

Signature [Signature]
(File the originally signed paper statement with your filing official.)

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

1. INCOME RECEIVED
NAME OF SOURCE OF INCOME
Salinas Valley Tourism & Visitors Bureau
ADDRESS (Business Address Acceptable)
1213 N. Davis Rd Salinas CA 93907
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Tourism & Visitor Development
YOUR BUSINESS POSITION
Tourist/Hospitality Concierge
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
Partnership
Sale of
Loan repayment
Commission or Rental Income
Other

1. INCOME RECEIVED
NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION
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
Partnership
Sale of
Loan repayment
Commission or Rental Income
Other

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*
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER
HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000
\$1,001 - \$10,000
\$10,001 - \$100,000
OVER \$100,000

INTEREST RATE
TERM (Months/Years)
SECURITY FOR LOAN
None
Personal residence
Real Property
Guarantor
Other

Comments: