

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

Date Received  
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**CITY OF SUNNYVALE, CA**  
**CITY CLERK'S OFFICE**

*A Public Document*

2009 APR 16 P 2:51

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
SPITALERI	ANTHONY	PAUL	650 144-8379
MAILING ADDRESS STREET (May use business address)		CITY	STATE ZIP CODE
545 S. FRANCES ST.		SUNNYVALE, CA	94086
OPTIONAL: FAX / E-MAIL ADDRESS			

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

Name of Office, Agency, or Court:  
Council City of Sunnyvale

Division, Board, District, if applicable:  
MEMBER

Your Position:  
COUNCIL MEMBER

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: SUNNYVALE

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

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

State

County of \_\_\_\_\_

City of SUNNYVALE

Multi-County \_\_\_\_\_

Other \_\_\_\_\_

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

Assuming Office/Initial Date: \_\_\_\_\_

Annual: The period covered is January 1, 2008, through December 31, 2008.

-or-

The period covered is \_\_\_\_\_, through December 31, 2008.

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

The period covered is January 1, 2008, through the date of leaving office.

-or-

The period covered is \_\_\_\_\_, through the date of leaving office.

Candidate Election Year: \_\_\_\_\_

**4. Schedule Summary**

► Total number of pages including this cover page: 2

► 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 - Gifts - 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 4/14/09  
(month, day, year)

Signature Anthony Spitaleri  
(File the originally signed 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  
SPITALERI

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
ANNCA

ADDRESS  
545 S. FRANCES ST Sunnyvale

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
CONSULTING

YOUR BUSINESS POSITION  
OWNER

GROSS INCOME RECEIVED  
 \$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  
 Loan repayment  
 Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more

Other Contractor Fee  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Palo Alto Firefighter Union

ADDRESS  
P.O. Box 712, Palo Alto, CA - 94302

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION  
PRESIDENT OF LOCAL UNION

GROSS INCOME RECEIVED  
 \$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  
 Loan repayment  
 Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more

Other Mostly Monthly Stipend  
(Describe)

**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*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER	<input type="checkbox"/> Real Property _____	Street address
_____		_____
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Guarantor _____	City
<input type="checkbox"/> \$500 - \$1,000		
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Other _____	(Describe)
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000		

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