State of California-Health and Human Services

DS 6016 (Rev. 08/2013)

CONFLICT OF INTEREST REPORTING STATEMEN?

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JUL 02 2019



The duties and responsibilities of your position with the regional center require you to file this Conflict of Interest Reporting Statement. The purpose of this statement is to assist you, the regional center and the Department of Developmental Services (DDS) to identify any relationships, positions or circumstances involving you which may create a conflict of interest between your regional center duties and obligations, and any other financial interests and/or relationships that you may have. In order to be comprehensive, this reporting statement requires you to provide information with respect to your financial interests.

A "conflict of interest" generally exists if you have one or more personal, business, or financial interests, or relationships that would cause a reasonable person with knowledge of the relevant facts to question your impartiality with respect to your regional center duties. The specific circumstances and relationships which create a conflict of interest are set forth in the California Code of Regulations, title 17, sections 54500 through 54530. You should review these provisions to understand the specific financial interests and relationships that can create a conflict of interest.

Please answer the following questions to the best of your knowledge. If you find a question requires further explanation and/or there is not enough space to thoroughly answer the question, please attach as many additional sheets as necessary, and refer to the question number next to your answer. If the regional center identifies a conflict involving you, it will be required to prepare a conflict resolution plan. Some relevant definitions have been provided in the footnotes to assist you in responding to this statement.

You are required to file this Reporting Statement within 30 days of beginning your employment with the regional center or from the date that you are appointed to the regional center board or advisory committee board. You are then required to file an annual Reporting Statement by August 1st of every year while you remain employed with the regional center or while you are a member of the regional center board or advisory committee board. You must also file a Reporting Statement within 30 days of any change in your status that could result in a conflict of interest. Circumstances that can constitute a change in your status that can require you to file an updated Reporting Statement are described below in footnote one.

A. INFORMATION OF REPORTING INDIVIDUAL				
Name:		Regional Center:	į.	
Regional Center Position/Title:	☐ Governing Board ☐ Vendor Advisory ☐ Contractor	Member Committee sitting on Board ☐ Agent	☐ Executive Director ☐ Employee ☐ Consultant	
Reporting Status:	Annual Change of Status	New Appointment (date):-	<u> </u>	
If a change in status, date and	circumstance of char	nge in status:		

1. Please list your job title and describe your job duties at the regional center.

use Munager

¹ Change of status includes a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in financial interest, familial relationship, legal commitment, change in regional center position or duties, change in regional center, or change to outside position or duties. See California Code of Regulations, title 17, sections 54531(d) and 54532(d).



	☐ Employee/Other
2.	Do you or a family member ² work for any entity or organization that is a regional center provider or contractor? Myes In no - If yes, provide the name of the entity or organization and describe what services it provides for the regional center or regional center consumers. If the provider or contractor is a state or local governmental entity, provide the specific name of the state or local governmental entity and describe your job duties at the state or local governmental entity. Visionary Independence Program - ILS
	assist clients lil in the community.
3.	Do you or a family member own or hold a position ³ in an entity or organization that is a regional center provider or contractor? Yes the lifty yes, provide the name of the entity or organization, describe what services it provides for the regional center or regional center consumers, and describe your or your family member's financial interest. Name of organization — Visionary Independence
	Services- Independent Living Skills 1:1 in the community.

☐ Governing Board Member ☐ Vendor Advisory on Board

4. Are you a regional center advisory committee board member?

yes Ano -- If yes, are you a member of the governing board or owner or employee of an entity or organization that provides services to the regional center or regional center consumers?

yes Ano -- If yes, provide the name of the entity or organization and describe what services it provides for the regional center or regional center consumers.

5. If you are a regional center advisory committee board member and answered yes to all the questions in Question 4 above, do any of the following apply to you: (a) are you an officer of the regional center board; (b) do you vote on purchasing services from a regional center provider; or (c) do you vote on matters where you might have a financial interest? yes yes ano -- If yes, please explain.

² Family member includes your spouse, domestic partner, parents, stepparents, grandparents, siblings, stepsiblings, children, stepchildren, grandchildren, parent-in-laws, brother-in-laws, sister-in-laws, son-in-laws and daughter—in-laws. See California Code of Regulations, title 17, sections 54505(f).

³ For purposes of this question, hold a position generally means that you or a family member is a director, officer, owner, partner, employee, or shareholder of an entity or organization that is a regional center provider or contractor. For a specific description of positions that create a conflict of interest in a regional center provider or contractor see the California Code of Regulations, title 17, sections 54520 and 54526.



		☐ Vendor Advisory on Board ☐ Executive Director ☐ Employee/Other
6.	Do any of the decisions you make when performing your job duties wi financially benefit you or a family member ⁴ ? [Note: Governing board in question if the financial benefit would be available to regional center con yes no — If yes, please explain.	nembers do not have to answer "yes" to this

Governing Board Member

9. Do any of your family members have a financial interest in any contract with the regional center?

If yes, did you negotiate, make, execute or approve the contract on behalf of the regional center?

If yes, please explain.

5 California Code of Regulations, title 17, sections 54523(b)(2) and 54528(b)(2) describes the types of conduct which constitute involvement in the making of a contract.

6 For purposes of greations 8 and 9, a figured interest in a contract canarally means any direct or indirect interest in a contract that can

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For purposes of questions 8 and 9, a financial interest in a contract generally means any direct or indirect interest in a contract that can cause you or a family member to receive any sort of financial gain or avoid any sort of financial loss irrespective of the dollar amount. California Code of Regulations, title 17, sections 54523 and 54528 define when financial interests in a contract will occur.

	Governing Board Member Vendor Advisory on Board Executive Director Employee/Other
10. Do you evaluate employment applications or contract bids that are submitted by your fam U yes no If yes, please explain.	ily member(s)?

11.	. Your job duties require you to act in the best interests of the regional center and regional center consumers. Do	you c
	have any circumstances or other financial interests not already discussed above that would prevent you from a	cting
	in the best interests of the regional center or its consumers?	

ATTESTATION

(print name) HEREBY CONFIRM that I have read and understand the regional center's Conflict of Interest Policy and that my responses to the questions in this Conflict of Interest Reporting Statement are complete, true, and correct to the best of my information and belief. I agree that if I become aware of any information that might indicate that this statement is not accurate or that I have not complied with the regional center's Conflict of Interest Policy or the applicable conflict of interest laws, I will notify the regional center's designated individual immediately. I understand that knowingly providing false information on this Conflict of Interest Reporting Statement shall subject me to a civil penalty in an amount up to fifty thousand dollars (\$50,000) pursuant to Welfare and Institutions Code section 4626.

Signature Carrier Carrier	Date 7.1.19
NTERNALUSEIGNUY Date this Statement was received by Reviewer:	
The reporting individual	ent potential conflict of interest
Signature of Designated Reviewer	Date Review Completed





State of California-Health and Human Services Agency

RECEIVED

JUL 12 2019

Department of Developmental Services



CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (Rev. 08/2013)

INFORMATION OF REPORTING INDIVIDUAL

H.R.

The duties and responsibilities of your position with the regional center require you to file this Conflict of Interest Reporting Statement. The purpose of this statement is to assist you, the regional center and the Department of Developmental Services (DDS) to identify any relationships, positions or circumstances involving you which may create a conflict of interest between your regional center duties and obligations, and any other financial interests and/or relationships that you may have. In order to be comprehensive, this reporting statement requires you to provide information with respect to your financial interests.

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Please answer the following questions to the best of your knowledge. If you find a question requires further explanation and/or there is not enough space to thoroughly answer the question, please attach as many additional sheets as necessary, and refer to the question number next to your answer. If the regional center identifies a conflict involving you, it will be required to prepare a conflict resolution plan. Some relevant definitions have been provided in the footnotes to assist you in responding to this statement.

You are required to file this Reporting Statement within 30 days of beginning your employment with the regional center or from the date that you are appointed to the regional center board or advisory committee board. You are then required to file an annual Reporting Statement by August 1st of every year while you remain employed with the regional center or while you are a member of the regional center board or advisory committee board. You must also file a Reporting Statement within 30 days of any change in your status that could result in a conflict of interest. Circumstances that can constitute a change in your status that can require you to file an updated Reporting Statement are described below in footnote one.

Name: A	Regional Center: East Bay
Regional Center Position/Title:	☐ Governing Board Member ☐ Vendor Advisory Committee sitting on Board ☐ Contractor ☐ Agent ☐ Executive Director ☐ Employee ☐ Consultant
- 1120	Annual New Appointment (date): Change of Status¹ circumstance of change in status:
1. Please list your job title and de Facilitate a Provide Su Montoy l	scribe your job duties at the regional center. Adult co-sc Manger 18 iling word on IPP. S pport and advocacy for clients & families. nealth of clients.

Change of status includes a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in financial interest, familial relationship, legal commitment, change in regional center position or duties, change in regional center, or change to outside position or duties. See California Code of Regulations, title 17, sections 54531(d) and 54532(d)





	Governing Board Member
	☐ Vendor Advisory on Board
8	Executive Director
	☐ Employee/Other
you or a family member ² work for any entity or organization that is a regional center	provider or contractor?

2. Do you or a family member² work for any entity or organization that is a regional center provider or contractor?

yes one -- If yes, provide the name of the entity or organization and describe what services it provides for the regional center or regional center consumers. If the provider or contractor is a state or local governmental entity, provide the specific name of the state or local governmental entity and describe your job duties at the state or local governmental entity.

- Haramber Community Services & Consulting Community day frogram Profesional Consulting Services

(Denise O

3. Do you or a family member own or hold a position in an entity or organization that is a regional center provider or contractor? by yes one of the entity or organization, describe what services it provides for the regional center or regional center consumers, and describe your or your family member's financial interest.

RCETS (outracted RN, Skilled nursing Services)

4. Are you a regional center advisory committee board member? yes no -- If yes, are you a member of the governing board or owner or employee of an entity or organization that provides services to the regional center or regional center consumers? yes no -- If yes, provide the name of the entity or organization and describe what services it provides for the regional center or regional center consumers.

NA

² Family member includes your spouse, domestic partner, parents, stepparents, grandparents, siblings, stepsiblings, children, stepchildren, grandchildren, parent-in-laws, brother-in-laws, sister-in-laws, son-in-laws and daughter-in-laws. See Catifornia Code of Regulations, tille 17, sections 54505(f).

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3 For purposes of this question, hold a position generally means that you or a family member is a director, officer, owner, partner, employee, or shareholder of an entity or organization that is a regional center provider or contractor. For a specific description of positions that create a conflict of interest in a regional center provider or contractor see the California Code of Regulations, title 17, sections 54520 and 54526.



	☐ Executive Director ☐ Employee/Other	
6.	Do any of the decisions you make when performing your job duties with the regional center have the potential to financially benefit you or a family member ⁴ ? [Note: Governing board members do not have to answer "yes" to this question if the financial benefit would be available to regional center consumers or their families generally].	S
	yes Pano If yes, please explain.	

☐ Governing Board Member ☐ Vendor Advisory on Board

over pano-lives, please explain.

Currently I don't nove any clients althorombee or resieving services by Horombee. I don't have any clients in need of skilled nursing services

7. Are you responsible for negotiating, making, sexecuting or approving contracts on behalf of the regional center? yes in o -- If yes, please explain.

9. Do any of your family members have a financial interest in any contract with the regional center? See yes one of yes, did you negotiate, make, execute or approve the contract on behalf of the regional center? See yes one of yes, please explain.

5 California Code of Regulations, title 17, sections 54523(b)(2) and 54528(b)(2) describes the types of conduct which constitute involvement in

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	☐ Vendor Advisory on Board ☐ Executive Director ☐ Employee/Other
10. Do you evaluate employment applications or contract bids that are submitted by your fa ☐ yes ☐ o If yes, please explain.	mily member(s)?
11. Your job duties require you to act in the best interests of the regional center and regional have any circumstances or other financial interests not already discussed above that wo in the best interests of the regional center or its consumers?	ould prevent you from acting
B. ATTESTATION	
(print name) HEREBY CONFIRM that I have regional center's Conflict of Interest Policy and that my responses to the questions in this Contact are complete, true, and correct to the best of my information and belief. I agree any information that might indicate that this statement is not accurate or that I have not	onflict of Interest Reporting the that if I become aware of
center's Conflict of Interest Policy or the applicable conflict of interest laws, I will notify the individual immediately. I understand that knowingly providing false information on this Constatement shall subject me to a civil penalty in an amount up to fifty thousand dollars (\$50,00 institutions Code section 4626. Signature Date	regional center's designated onflict of Interest Reporting
ndividual immediately. I understand that knowingly providing false information on this Constitutions Code section 4626. Signature Date NTERNALUS = ONLY Date this Statement was received by Reviewer:	regional center's designated onflict of Interest Reporting 00) pursuant to Welfare and
I understand that knowingly providing false information on this Constitutions Code section 4626. Signature Date INTERNALUS ONLY Date this Statement was received by Reviewer: The reporting individual	regional center's designated onflict of Interest Reporting 00) pursuant to Welfare and

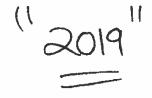
☐ Governing Board Member







State of California-Health and Human Services Agency



Department of Developmental Services



CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (Rev. 08/2013)

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Name: M	Regional Center:	East Bay
Regional Center Position/Title:	☐ Governing Board Member ☐ Vendor Advisory Committee sitting on Board ☐ Contractor ☐ Agent	☐ Executive Director Employee ☐ Consultant
Reporting Status: If a change in status, date and	☐ New Appointment (date): ☐ Change of Status¹ circumstance of change in status:	
1. Please list your job title and de Case Manaa aand objectiv	escribe your job duties at the regional center. JOHN CASSIST CLIENTS 1005	in achieving goals

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		☐ Employee/Other	
	Do you or a family member ² work for any entity or organization that is a regional center problems. If yes, provide the name of the entity or organization and describe what so regional center or regional center consumers. If the provider or contractor is a state or local governmental entity and describe your job of governmental entity. Strices Castro Valle	ervices it provides for the ocal governmental entity, duties at the state or local level — ACH	"vi7
<i>Cal</i> 3.	Family Member is a technical property of the property of the provides for the regional center or regional center consumers, and describe your or your finterest. Strides Castro Valley— Center — Center —	family member's financial	
On 4.	Family Member is a teacher First of interest vent has been for the your a regional center advisory committee board member? I yes tho If yes, a governing board or owner or employee of an entity or organization that provides services regional center consumers? I yes tho If yes, provide the name of the entity or owner services it provides for the regional center or regional center consumers.	Yed With Deare you a member of the to the regional center or	

☐ Governing Board Member☐ Vendor Advisory on Board☐ Executive Director

5. If you are a regional center advisory committee board member and answered yes to all the questions in Question 4 above, do any of the following apply to you: (a) are you an officer of the regional center board; (b) do you vote on purchasing services from a regional center provider; or (c) do you vote on matters where you might have a financial interest?

Q yes Q no -- If yes, please explain.

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Governing Board Member
Vendor Advisory on Board
☐ Executive Director
☐ Employee/Other

6. Do any of the decisions you make when performing your job duties with the regional center have the potential to financially benefit you or a family member 1? [Note: Governing board members do not have to answer "yes" to this question if the financial benefit would be available to regional center consumers or their families generally). By referral to the entity
of myclients yes on -- If yes, please explain.

Conflict of Interest Report Has been Filed with DDS

7. Are you responsible for negotiating, making, sexecuting or approving contracts on behalf of the regional

8. Do you have a financial interest in any contract with the regional center were no -- If yes, did you negotiate or approve the contract on behalf of the regional center? Uyes no -- If yes, please explain.

-- If yes, did you negotiate,

did not negotiate

9. Do any of your family members have a financial interest in any contract with the regional center? If yes, did you negotiate, make, execute or approve the contract on behalf of the regional center? If yes, please explain.

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☐ Governing Board Member
Uendor Advisory on Board
☐ Executive Director
Employee/Other

10. Do you evaluate employment applications or contract bids that are submitted by your family member(s)?

yes ino -- if yes, please explain.

11. Your job duties require you to act in the best interests of the regional center and regional center consumers. Do you have any circumstances or other financial interests not already discussed above that would prevent you from acting in the best interests of the regional center or its consumers? Yes yes, please explain.

B. ATTESTATION

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Signature	Date 5/16/19
ANTERNAL USE ODUTA	
Date this Statement was received by Reviewer:	/_/
The reporting individual does does not have a	present D potential conflict of interest
Signature of Designated Reviewer 414	Date Review Completed
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Department of Developmental Services

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CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (Rev. 08/2013)

H.R.

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Reporting Status:	✓ Annual✓ Change of Status	New Appointment (date):	्			
If a change in status, date and	circumstance of char	nge in status:				

1. Please list your job title and describe your job duties at the regional center.

Case management and coordination of Services

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, S	Governing Board Member	
	☐ Vendor Advisory on Board	
No.	☐ Executive Director	
	☐ Employee/Other	
Do you or a family member ² work for any entity or organization that is a regional center profile \square yes \square no $-$ If yes, provide the name of the entity or organization and describe what s		

regional center or regional center consumers. If the provider or contractor is a state or local governmental entity, provide the specific name of the state or local governmental entity and describe your job duties at the state or local governmental entity.

Parents, Siblings: Agape - day program

Albertal Valley Resimal Center

Albertal Valley Resimal Center

3. Do you or a family member own or hold a position³ in an entity or organization that is a regional center provider or contractor? very set on a provide the name of the entity or organization, describe what services it provides for the regional center or regional center consumers, and describe your or your family member's financial interest.

Same as above

2.

5. If you are a regional center advisory committee board member and answered yes to all the questions in Question 4 above, do any of the following apply to you: (a) are you an officer of the regional center board; (b) do you vote on purchasing services from a regional center provider; or (c) do you vote on matters where you might have a financial interest? yes no -- if yes, please explain.

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6.	Do any of the decisions you make when performing your job duties with the regional cerfinancially benefit you or a family member ⁴ ? [Note: Governing board members do not have question if the financial benefit would be available to regional center consumers or their factory of the property of the prop	ve to answer "yes" to this
7.	Are you responsible for negotiating, making, executing or approving contracts on behavener? yes no If yes, please explain.	If of the regional
		,
8.	Do you have a financial interest in any contract ⁶ with the regional center?	- If yes, did you negotiate - If yes, please explain.
€.	Do any of your family members have a financial interest in any contract with the regional configuration of the regional contract on behalf of the regional configuration of the regional configuration.	enter?

☐ Governing Board Member ☐ Vendor Advisory on Board

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		☐ Executive Director ☐ Employee/Other
10.	Do you evaluate employment applications or contract bids that are submitted by \ yes 🎉 no If yes, please explain.	your family member(s)?
	20	
- 1	Your job duties require you to act in the best interests of the regional center and in ave any circumstances or other financial interests not already discussed above to the hest interests of the regional center or its consumers?	
		56
B. /	ATTESTATION	· · · · · · · · · · · · · · · · · · ·
State any i cente ndiv State	(print name) HEREBY CONFIRM that make the complete, true, and correct to the best of my information and belief. Information that might indicate that this statement is not accurate or that I have's Conflict of Interest Policy or the applicable conflict of interest laws, I will not indual immediately. I understand that knowingly providing false information on the shall subject me to a civil penalty in an amount up to fifty thousand dollars utions Code section 4626.	n this Conflict of Interest Reporting. I agree that if I become aware on the not complied with the regional ify the regional center's designated this Conflict of Interest Reporting.
23	Signature Date	07/29/16
	ANY PRIVATE ONLY Date this Statement was received by Reviewer:	
	The reporting individual	tential conflict of interest
	Signature of Designated Reviewer	Date Review Completed
	* Hu	8/12/6

☐ Governing Board Member ☐ Vendor Advisory on Board







JUN 28 2013

CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (New 08/2012)

H.R.

The duties and responsibilities of your position with the regional center require you to file this Conflict of Interest Reporting Statement. The purpose of this statement is to assist you, the regional center and the Department of Developmental Services (DDS) to identify any relationships, positions or circumstances involving you which may create a conflict of interest between your regional center duties and obligations, and any other financial interests and/or relationships that you may have. In order to be comprehensive, this reporting statement requires you to provide information with respect to your financial interests.

A "conflict of interest" generally exists if you have one or more personal, business, or financial interests, or relationships that would cause a reasonable person with knowledge of the relevant facts to question your impartiality with respect to your regional center duties. The specific circumstances and relationships which create a conflict of interest are set forth in the California Code of Regulations, title 17, sections 54500 through 54530. You should review these provisions to understand the specific financial interests and relationships that can create a conflict of interest.

Please answer the following questions to the best of your knowledge. If you find a question requires further explanation and/or there is not enough space to thoroughly answer the question, please attach as many additional sheets as necessary, and refer to the question number next to your answer. If the regional center identifies a conflict involving you, it will be required to prepare a conflict resolution plan. Some relevant definitions have been provided in the footnotes to assist you in responding to this statement.

You are required to file this Reporting Statement within 30 days of beginning your employment with the regional center or from the date that you are appointed to the regional center board or advisory committee board. You are then required to file an annual Reporting Statement by August 1st of every year while you remain employed with the regional center or while you are a member of the regional center board or advisory committee board. You must also file a Reporting Statement within 30 days of any change in your status that could result in a conflict of interest. Circumstances that can constitute a change in your status that can require you to file an updated Reporting Statement are described below in footnote one.

A. INFORMATION OF REPORTIN	IG INDIVIDUAL		
Name: LLLL		Regional Center: Re	gional Center of the East Bay
Regional Center Position/Title:	☐ Governing Board ☐ Vendor Advisory ☐ Contractor	Member Committee sitting on Board ☐ Agent	Executive DirectorEmployeeConsultant
Reporting Status:	Annual Change of Status		· · · · · · · · · · · · · · · · · · ·
If a change in status, date and	circumstance of chal	nge in status:	
1. Please list your job title and d	escribe your job dutie	es at the regional center.	2.1
Case manager Facilitate the IPP planning proc	ess. Develope the IPP	for assigned Consumers. Oversee	the implementation of the IPP.

¹ Change of status includes reporting a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in financial interest, familial relationship, legal commitment, change in regional center position or duties, or change to outside position or duties. See California Code of Regulations, title 17, sections 54531(d) and 54532(d).



675		Governing Board Member
		O Vendor Advisory on Board
27	18	Li Executive Director
	9 4	☐ Employee/Other
	-	
	£	

2. Do you or a family member² work for any entity or organization that is a regional center provider or contractor?
 yes no - If yes, provide the name of the entity or organization and describe what services it provides for the regional center or regional center consumers. If the provider or contractor is a state or local entity, provide the specific name of the state or local entity and describe your job duties at the state or local entity.

My spouse is employed as the for Futures Explored, Inc., an RCEB vendor. Futures Explored provides life skills training and vocational training to adults with developmental disabilities. Futures Explored also sponsers the Joey Travolta Summer Inclusion Film Camp for campers with ASD, ages 10 years and older.

3. Do you or a family member own or hold a position³ in an entity or organization that is a regional center provider or contractor? ves no - if yes, provide the name of the entity or organization, describe what services it provides for the regional center or regional center consumers, and describe your or your family member's financial interest.

Please see response to question #2.

4. Are you a regional center advisory committee board member? yes no -- If yes, are you a member of the governing board or owner or employee of an entity or organization that provides services to the regional center or regional center consumers? yes no -- If yes, provide the name of the entity or organization and describe what services it provides for the regional center or regional center consumers.

WAR BOARD

5. If you are a regional center advisory committee board member and answered yes to all the questions in Question 4 above, do any of the following apply to you: (a) are you an officer of the regional center board; (b) do you vote on purchasing services from a regional center provider; or (c) do you vote on matters where you might have a financial interest?

Q yes Q no -- If yes, please explain.

² Family member includes your spouse, domestic partner, parents, stepparents, grandparents, siblings, stepsiblings, children, etspchildren, grandchildren, and in-laws. See California Code of Regulations, title 17, sections 54505(f).

³ For purposes of this question, hold a position generally means that you or a family member is a director, officer, owner, partner, employee, or shareholder of an entity or organization that is a regional center provider or contractor. For a specific description of positions that create a conflict of interest in a regional center provider or contractor see the California Code of Regulations, title 17, sections 54520 and 54526.

		D Executive Director D Employee/Other
6.	Do any of the decisions you make when performing your job duties with the regional ce financially benefit you or a family member 4 ? \square yes \square no if yes, please explain.	nter have the potential
	#	
	- National Control of the Control of	. to
7.	Are you responsible for negotiating, making, ⁵ executing or approving contracts on beh center?	alf of the regional
	I coordinate the Implementation of the Consumer's IPP. This includes evaluating when a need exist through RCEB authorized funding.	its that can only be met
		*.
•	Daniel Land Constitution of the Constitution o	
8.	Do you have a financial interest in any contract ⁶ with the regional center?	- If yes, did you negotiat
	make, execute of approve the contract on behalf of the regional center?	If yes, please explain.
	** 300 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
9.	Do any of your family members have a financial interest in any contract with the regional of	enter? Øyes 🗅 no
	If yes, did you negotiate, make, execute or approve the contract on behalf of the regional of the yes, please explain.	
	en Tr	

Governing Board Member U Vendor Advisory on Board

to

⁴ Generally, a decision can financially benefit you or a family member if the decision can either directly or indirectly cause you or a family member to receive a financial gain or avoid a financial loss. For a specific description of the types of decisions that can result in a financial benefit to you or a family member see the California Code of Regulations, title 17, sections 54522 and 54527.

⁵ California Code of Regulations, title 17, sections 54523(b)(2) and 54528(b)(2) describes the types of conduct which constitute involvement in

the making of a contract.

For purposes of questions 8 and 9, a financial interest in a contract generally means any direct or indirect interest in a contract that can cause you or a family member to receive any sort of financial gain or avoid any sort of financial loss irrespective of the dollar amount. California Code of Regulations, title 17, sections 54523 and 54528 define when financial interests in a contract will occur.

RECEIVED epartment of Developmental Services

JUN 24 2019



CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (Rev. 08/2013)

A. INFORMATION OF REPORTING INDIVIDUAL

H.R.

The duties and responsibilities of your position with the regional center require you to file this Conflict of Interest Reporting Statement. The purpose of this statement is to assist you, the regional center and the Department of Developmental Services (DDS) to identify any relationships, positions or circumstances involving you which may create a conflict of interest between your regional center duties and obligations, and any other financial interests and/or relationships that you may have. In order to be comprehensive, this reporting statement requires you to provide information with respect to your financial interests.

A "conflict of interest" generally exists if you have one or more personal, business, or financial interests, or relationships that would cause a reasonable person with knowledge of the relevant facts to question your impartiality with respect to your regional center duties. The specific circumstances and relationships which create a conflict of interest are set forth in the California Code of Regulations, title 17, sections 54500 through 54530. You should review these provisions to understand the specific financial interests and relationships that can create a conflict of interest.

Please answer the following questions to the best of your knowledge. If you find a question requires further explanation and/or there is not enough space to thoroughly answer the question, please attach as many additional sheets as necessary, and refer to the question number next to your answer. If the regional center identifies a conflict involving you, it will be required to prepare a conflict resolution plan. Some relevant definitions have been provided in the footnotes to assist you in responding to this statement.

You are required to file this Reporting Statement within 30 days of beginning your employment with the regional center or from the date that you are appointed to the regional center board or advisory committee board. You are then required to file an annual Reporting Statement by August 1st of every year while you remain employed with the regional center or while you are a member of the regional center board or advisory committee board. You must also file a Reporting Statement within 30 days of any change in your status that could result in a conflict of interest. Circumstances that can constitute a change in your status that can require you to file an updated Reporting Statement are described below in footnote one.

Name:	(Annual Control	Regional Center:	PCEB	
Regional Center Position/Title:	☐ Governing Boa☐ Vendor Adviso☐ Contractor	ard Member ory Committee sitting on Board Agent	Executive Director Employee Consultant	
Reporting Status:	☐ Annual☐ Change of State			
If a change in status, date and	d circumstance of c	hange in status:		
1. Please list your job title and o	describe your job do Yager > Light	uties at the regional center. COUDINATE SCA	nces for	bilingual
		should have been reported, change in the		

¹ Change of status includes a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in financial Interest, familial relationship, legal commitment, change in regional center position or duties, change in regional center, or change to outside position or duties. See California Code of Regulations, title 17, sections 54531(d) and 54532(d).





		☐ Executive Director ☐ Employee/Other
2.	Do you or a family member ² work for any entity or organization that is a regional center provide the name of the entity or organization and describe what segional center or regional center consumers. If the provider or contractor is a state or provide the specific name of the state or local governmental entity and describe your job governmental entity.	ervices it provides for the ocal governmental entity,
	EBL	
	adult services	
3.	Do you or a family member own or hold a position ³ in an entity or organization that is a contractor? yes no — If yes, provide the name of the entity or organization, provides for the regional center or regional center consumers, and describe your or you interest.	describe what services it
4.	Are you a regional center advisory committee board member?	es to the regional center or
5.	If you are a regional center advisory committee board member and answered yes to all above, do any of the following apply to you: (a) are you an officer of the regional center purchasing services from a regional center provider; or (c) do you vote on matters when interest? yes 2 no If yes, please explain.	er board; (b) do you vote on

☐ Governing Board Member ☐ Vendor Advisory on Board

² Family member includes your spouse, domestic partner, parents, stepparents, grandparents, siblings, stepsiblings, children, stepchildren, grandchildren, parent-in-laws, brother-in-laws, sister-in-laws, son-in-laws and daughter-in-laws. See California Code of Regulations, title 17, sections 54505(f).

³ For purposes of this question, hold a position generally means that you or a family member is a director, officer, owner, partner, employee, or shareholder of an entity or organization that is a regional center provider or contractor. For a specific description of positions that create a conflict of interest in a regional center provider or contractor see the California Code of Regulations, title 17, sections 54520 and 54526.



	· ·	☐ Employee/Other
6.	Do any of the decisions you make when performing your job duties with the regional cerfinancially benefit you or a family member ⁴ ? [Note: Governing board members do not har question if the financial benefit would be available to regional center consumers or their fall yes In no If yes, please explain.	ve to answer "yes" to this
7.	Are you responsible for negotiating, making, executing or approving contracts on behinder?	alf of the regional
8,	Do you have a financial interest in any contract ⁶ with the regional center?	If yes, did you negotiate, If yes, please explain.
9.	Do any of your family members have a financial interest in any contract with the regional of the region of	I center?

☐ Governing Board Member Uvendor Advisory on Board ☐ Executive Director

the making of a contract.

⁴ Generally, a decision can financially benefit you or a family member if the decision can either directly or indirectly cause you or a family member to receive a financial gain or avoid a financial loss. For a specific description of the types of decisions that can result in a financial benefit to you or a family member see the California Code of Regulations, title 17, sections 54522 and 64527.

California Code of Regulations, title 17, sections 54523(b)(2) and 54528(b)(2) describes the types of conduct which constitute involvement in

For purposes of questions 8 and 9, a financial interest in a contract generally means any direct or Indirect interest in a contract that can cause you or a family member to receive any sort of financial gain or avoid any sort of financial loss irrespective of the dollar amount. California Code of Regulations, title 17, sections 54523 and 54528 define when financial interests in a contract will occur.

☐ Governing Board Member
U Vendor Advisory on Board
☐ Executive Director
☐ Employee/Other

10. Do you evaluate employment applications or contract bids that are submitted by your family member(s)? yes no -- If yes, please explain.

11. Your job duties require you to act in the best interests of the regional center and regional center consumers. Do you have any circumstances or other financial interests not already discussed above that would prevent you from acting

B. ATTESTATION

(print name) HEREBY CONFIRM that I have read and understand the regional center's Conflict of Interest Policy and that my responses to the questions in this Conflict of Interest Reporting Statement are complete, true, and correct to the best of my information and belief. I agree that if I become aware of any information that might indicate that this statement is not accurate or that I have not complied with the regional center's Conflict of Interest Policy or the applicable conflict of interest laws, I will notify the regional center's designated individual immediately. I understand that knowingly providing false information on this Conflict of Interest Reporting Statement shall subject me to a civil penalty in an amount up to fifty thousand dollars (\$50,000) pursuant to Welfare and Institutions Code section 4626.

Signature	39	Date	4/24/A
INTERNAL USE ONLY			
Date this Statement was received by Revie	wer:		
The reporting individual	does not have a present	t 🛭 poten	tial conflict of interest
Signature of pesignated Reviewer		Dat	e Review Completed
× X th			6/29/19
			le solution le Approved
	Page 4 of 4		180





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CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (Rev. 08/2013)

The duties and responsibilities of your position with the regional center require you to file this Conflict of Interest Reporting Statement. The purpose of this statement is to assist you, the regional center and the Department of Developmental Services (DDS) to identify any relationships, positions or circumstances involving you which may create a conflict of interest between your regional center duties and obligations, and any other financial interests and/or relationships that you may have. In order to be comprehensive, this reporting statement requires you to provide information with respect to your financial interests.

A "conflict of interest" generally exists if you have one or more personal, business, or financial interests, or relationships that would cause a reasonable person with knowledge of the relevant facts to question your impartiality with respect to your regional center duties. The specific circumstances and relationships which create a conflict of interest are set forth in the California Code of Regulations, title 17, sections 54500 through 54530. You should review these provisions to understand the specific financial interests and relationships that can create a conflict of interest.

Please answer the following questions to the best of your knowledge. If you find a question requires further explanation and/or there is not enough space to thoroughly answer the question, please attach as many additional sheets as necessary, and refer to the question number next to your answer. If the regional center identifies a conflict involving you, it will be required to prepare a conflict resolution plan. Some relevant definitions have been provided in the footnotes to assist you in responding to this statement.

You are required to file this Reporting Statement within 30 days of beginning your employment with the regional center or from the date that you are appointed to the regional center board or advisory committee board. You are then required to file an annual Reporting Statement by August 1st of every year while you remain employed with the regional center or while you are a member of the regional center board or advisory committee board. You must also file a Reporting Statement within 30 days of any change in your status that could result in a conflict of interest. Circumstances that can constitute a change in your status that can require you to file an updated Reporting Statement are described below in footnote one.

Regional Center Position/Title:	☐ Governing Board Member ☐ Vendor Advisory Committee sitting on ☐ Contractor ☐ Agent	Board
Reporting Status:	 □ Annual □ New Appointmen □ Change of Status¹ 	nt (date):
If a change in status, date an	d circumstance of change in status:	

¹ Change of status includes a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in financial interest, familial relationship, legal commitment, change in regional center position or duties, change in regional center, or change to outside position or duties. See California Code of Regulations, title 17, sections 54531(d) and 54532(d).

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Council Con

	☐ Executive Director ☐ Employee/Other	
2.	Do you or a family member ² work for any entity or organization that is a regional center provider or contractor? yes no If yes, provide the name of the entity or organization and describe what services it provides for the regional center or regional center consumers. If the provider or contractor is a state or local governmental entity provide the specific name of the state or local governmental entity and describe your job duties at the state or local governmental entity.	/,
	Hearing population, which includes Regional Center Consumers.	
3.	Do you or a family member own or hold a position ³ in an entity or organization that is a regional center provider of contractor? yes no If yes, provide the name of the entity or organization, describe what services in provides for the regional center or regional center consumers, and describe your or your family member's financial interest.	it
	is contracted with Deaf Counseling Advocacy Referral Agency (DCARA), an agency that serves the general population, including Regional Center consumers, as an ASL interpreter.	
4.	Are you a regional center advisory committee board member?	or
5.	If you are a regional center advisory committee board member and answered yes to all the questions in Question above, do any of the following apply to you: (a) are you an officer of the regional center board; (b) do you vote opurchasing services from a regional center provider; or (c) do you vote on matters where you might have a financial interest? Yes no If yes, please explain.	n

Governing Board Member

² Family member includes your spouse, domestic partner, parents, stepparents, grandparents, siblings, stepsiblings, children, stepchildren, grandchildren, parent-in-laws, brother-in-laws, sister-in-laws, son-in-laws and daughter—in-laws. See California Code of Regulations, title 17, sections 54505(f)

sections 54505(f).

3 For purposes of this question, hold a position generally means that you or a family member is a director, officer, owner, partner, employee, or shareholder of an entity or organization that is a regional center provider or contractor. For a specific description of positions that create a conflict of interest in a regional center provider or contractor see the California Code of Regulations, title 17, sections 54520 and 54526.

		☐ Vendor Advisory on Board ☐ Executive Director ☐ Employee/Other
6.	Do any of the decisions you make when performing your job duties with the regional certification if the financial benefit would be available to regional center consumers or their faculty yes on If yes, please explain.	ve to answer "yes" to this
7.	Are you responsible for negotiating, making, executing or approving contracts on behavener?	alf of the regional
	2 4	

8. Do you have a financial interest in any contract⁶ with the regional center? ☐ yes ☐ no -- If yes, did you negotiate, make, execute or approve the contract on behalf of the regional center? ☐ yes ☐ no -- If yes, please explain.

9. Do any of your family members have a financial interest in any contract with the regional center? 🖸 yes 🚨 no If yes, did you negotiate, make, execute or approve the contract on behalf of the regional center? If yes, please explain.

☐ yes ☑ no

☐ Governing Board Member

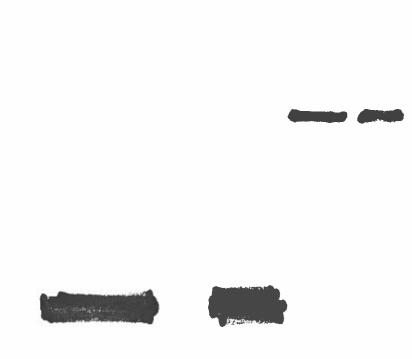
⁴ Generally, a decision can financially benefit you or a family member if the decision can either directly or indirectly cause you or a family member to receive a financial gain or avoid a financial loss. For a specific description of the types of decisions that can result in a financial benefit to you or a family member see the California Code of Regulations, title 17, sections 54522 and 54527.

California Code of Regulations, title 17, sections 54523(b)(2) and 54528(b)(2) describes the types of conduct which constitute involvement in the making of a contract.

For purposes of questions 8 and 9, a financial interest in a contract generally means any direct or indirect interest in a contract that can cause you or a family member to receive any sort of financial gain or avoid any sort of financial loss irrespective of the dollar amount. California Code of Regulations, title 17, sections 54523 and 54528 define when financial interests in a contract will occur.

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		Governing Board Member Vendor Advisory on Board Executive Director Employee/Other
	you evaluate employment applications or contract bids that are submitted by your fam yes 🛮 no If yes, please explain.	ily member(s)?
ha	our job duties require you to act in the best interests of the regional center and regional ave any circumstances or other financial interests not already discussed above that wou the best interests of the regional center or its consumers?	ld prevent you from acting
В. А	TTESTATION	
State any in cente	(print name) HEREBY CONFIRM that I have nal center's Conflict of Interest Policy and that my responses to the questions in this Coment are complete, true, and correct to the best of my information and belief. I agree information that might indicate that this statement is not accurate or that I have not er's Conflict of Interest Policy or the applicable conflict of interest laws, I will notify the results of the policy of the applicable conflict of interest laws, I will notify the results of the policy of the applicable conflict of interest laws, I will notify the results of the policy of the applicable conflict of interest laws, I will notify the results of the policy of the applicable conflict of interest laws, I will notify the results of the policy of the applicable conflict of interest laws, I will notify the results of the policy of the applicable conflict of interest laws, I will notify the results of the policy of the applicable conflict of interest laws, I will notify the results of the policy of the applicable conflict of interest laws, I will not the policy of the applicable conflict of interest laws, I will not the policy of the applicable conflict of interest laws, I will not the policy of the policy of the policy of the applicable conflict of interest laws, I will not the policy of th	onflict of Interest Reporting e that if I become aware of complied with the regional egional center's designated
State	dual immediately. I understand that knowingly providing false information on this Coment shall subject me to a civil penalty in an amount up to fifty thousand dollars (\$50,00 utions Code section 4626.	
	Signature Date 04/30	0/2019
	INTERNAL USE ONLY	
	Date this Statement was received by Reviewer:	
	The reporting individual	conflict of interest
	Signature of Designated Reviewer Date Re	eview Completed



Reset Form

CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (Rev. 08/2013)

The duties and responsibilities of your position with the regional center require you to file this Conflict of Interest Reporting Statement. The purpose of this statement is to assist you, the regional center and the Department of Developmental Services (DDS) to identify any relationships, positions or circumstances involving you which may create a conflict of interest between your regional center duties and obligations, and any other financial interests and/or relationships that you may have. In order to be comprehensive, this reporting statement requires you to provide information with respect to your financial interests.

A "conflict of interest" generally exists if you have one or more personal, business, or financial interests, or relationships that would cause a reasonable person with knowledge of the relevant facts to question your impartiality with respect to your regional center duties. The specific circumstances and relationships which create a conflict of interest are set forth in the California Code of Regulations, title 17, sections 54500 through 54530. You should review these provisions to understand the specific financial interests and relationships that can create a conflict of interest.

Please answer the following questions to the best of your knowledge. If you find a question requires further explanation and/or there is not enough space to thoroughly answer the question, please attach as many additional sheets as necessary, and refer to the question number next to your answer. If the regional center identifies a conflict involving you, it will be required to prepare a conflict resolution plan. Some relevant definitions have been provided in the footnotes to assist you in responding to this statement.

You are required to file this Reporting Statement within 30 days of beginning your employment with the regional center or from the date that you are appointed to the regional center board or advisory committee board. You are then required to file an annual Reporting Statement by August 1st of every year while you remain employed with the regional center or while you are a member of the regional center board or advisory committee board. You must also file a Reporting Statement within 30 days of any change in your status that could result in a conflict of interest. Circumstances that can constitute a change in your status that can require you to file an updated Reporting Statement are described below in footnote one.

A. INFORMATION OF REPORTIN	IG INDIVIDUAL		.:
Name: K S		Regional Center: RC	CEB
Regional Center Position/Title:	☐ Governing Boa☐ Vendor Adviso☐ Contractor	rd Member ry Committee sitting on Board ☐ Agent	□ Executive Director□ Employee□ Consultant
Reporting Status: If a change in status, date and	☐ Annual☐ Change of Stat		
		for Thrive. I had thought	ged jobs.
Please list your job title and or Director of Human Resource		ities at the regional center.	
Supervise HR and all aspect	s of payroll, benefits	s and Human Resources	

¹ Change of status includes a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in financial interest, familial relationship, legal commitment, change in regional center position or duties, change in regional center, or change to outside position or duties. See California Code of Regulations, title 17, sections 54531(d) and 54532(d).



		☐ Vendor Advisory on Board ☐ Executive Director ☐ Employee/Other
2.	Do you or a family member ² work for any entity or organization that is a regional center progress of the entity or organization and describe what segional center or regional center consumers. If the provider or contractor is a state or provide the specific name of the state or local governmental entity and describe your job governmental entity.	services it provides for the local governmental entity,
	works as overnight staff for Thrive Support Services, which provides Supported L Independent Living Services.	iving Services and
3.	Do you or a family member own or hold a position ³ in an entity or organization that is a contractor? (Pes) on o If yes, provide the name of the entity or organization, provides for the regional center or regional center consumers, and describe your or your interest. These provides ILS and SLS services. Works as an overland stags person for	describe what services it family member's financial
4.	Are you a regional center advisory committee board member?	es to the regional center or
5.	If you are a regional center advisory committee board member and answered yes to all tabove, do any of the following apply to you: (a) are you an officer of the regional center purchasing services from a regional center provider; or (c) do you vote on matters where interest? yes no If yes, please explain.	r board; (b) do you vote on

☐ Governing Board Member

² Family member includes your spouse, domestic partner, parents, stepparents, grandparents, siblings, stepsiblings, children, stepchildren, grandchildren, parent-in-laws, brother-in-laws, sister-in-laws, son-in-laws and daughter—in-laws. See California Code of Regulations, title 17, sections 54505(f).

sections 54505(f).

3 For purposes of this question, hold a position generally means that you or a family member is a director, officer, owner, partner, employee, or shareholder of an entity or organization that is a regional center provider or contractor. For a specific description of positions that create a conflict of interest in a regional center provider or contractor see the California Code of Regulations, title 17, sections 54520 and 54526.



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. . .

	☐ Employee/Other	
6.	Do any of the decisions you make when performing your job duties with the regional center have the potential financially benefit you or a family member ⁴ ? [Note: Governing board members do not have to answer "yes" to to question if the financial benefit would be available to regional center consumers or their families generally]. yes no If yes, please explain.	
7.	Are you responsible for negotiating, making, sexecuting or approving contracts on behalf of the regional center? yes no If yes, please explain.	
8.	Do you have a financial interest in any contract ⁶ with the regional center?	
9.	Do any of your family members have a financial interest in any contract with the regional center?	

☐ Governing Board Member ☐ Vendor Advisory on Board ☐ Executive Director

⁴ Generally, a decision can financially benefit you or a family member if the decision can either directly or indirectly cause you or a family member to receive a financial gain or avoid a financial loss. For a specific description of the types of decisions that can result in a financial benefit to you or a family member see the California Code of Regulations, title 17, sections 54522 and 54527.

5 California Code of Regulations, title 17, sections 54532(b)(2) describes the types of conduct which secretify the investment of conduct which secretifies the cod

California Code of Regulations, title 17, sections 54523(b)(2) and 54528(b)(2) describes the types of conduct which constitute involvement in

the making of a contract.

For purposes of questions 8 and 9, a financial interest in a contract generally means any direct or indirect interest in a contract that can cause you or a family member to receive any sort of financial gain or avoid any sort of financial loss irrespective of the dollar amount. California Code of Regulations, title 17, sections 54523 and 54528 define when financial interests in a contract will occur.

*			

	☐ Executive Director ☐ Employee/Other
10. Do you evaluate employment applications or contract bids that are submitted by your fa	nmily member(s)?
☐ yes ☑ no If yes, please explain.	
44. Value tala di stan un cuiun con sa natio stan la catio stante de sa catao de sa catao de sa catao de sa cat	al aantau aanoomaas. Da oo
11. Your job duties require you to act in the best interests of the regional center and region have any circumstances or other financial interests not already discussed above that we in the best interests of the regional center or its consumers? Q yes no If yes, p	ould prevent you from acting
B. ATTESTATION	
(print name) HEREBY CONFIRM that I have	ve read and understand the
regional center's Conflict of Interest Policy and that my responses to the questions in this Statement are complete, true, and correct to the best of my information and belief. I agi	
any information that might indicate that this statement is not accurate or that I have no	t complied with the regional
center's Conflict of Interest Policy or the applicable conflict of interest laws, I will notify the individual immediately. I understand that knowingly providing false information on this	Conflict of Interest Reporting
Statement shall subject me to a civil penalty in an amount up to fifty thousand dollars (\$50, Institutions Code section 4626.	000) pursuant to Welfare and
	1
Signature Date	11/27/19
INTERNAL USE ONLY	
Date this Statement was received by Reviewer:	
The reporting individual 🖾 does 🗆 does not have a 🗖 present 🗹 potenti	
Signature of Designated Reviewer Date	Review Completed

☐ Governing Board Member☐ Vendor Advisory on Board







State of California-Health and Human Services Agency

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FEB 13 2020

Department of Developmental Services
FEB 2 5 2020

Reset Form

H.R.

CONFLICT OF INTEREST REPORTING STATEMENT DS 6016 (Rev. 08/2013)

The duties and responsibilities of your position with the regional center require you to file this Conflict of Interest Reporting Statement. The purpose of this statement is to assist you, the regional center and the Department of Developmental Services (DDS) to identify any relationships, positions or circumstances involving you which may create a conflict of interest between your regional center duties and obligations, and any other financial interests and/or relationships that you may have. In order to be comprehensive, this reporting statement requires you to provide information with respect to your financial interests.

A "conflict of interest" generally exists if you have one or more personal, business, or financial interests, or relationships that would cause a reasonable person with knowledge of the relevant facts to question your impartiality with respect to your regional center duties. The specific circumstances and relationships which create a conflict of interest are set forth in the California Code of Regulations, title 17, sections 54500 through 54530. You should review these provisions to understand the specific financial interests and relationships that can create a conflict of interest.

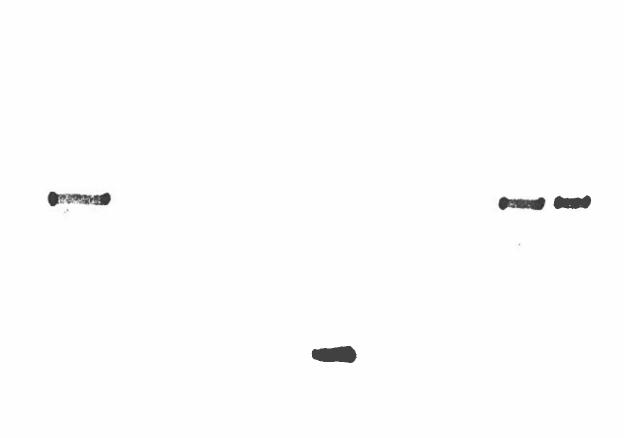
Please answer the following questions to the best of your knowledge. If you find a question requires further explanation and/or there is not enough space to thoroughly answer the question, please attach as many additional sheets as necessary, and refer to the question number next to your answer. If the regional center identifies a conflict involving you, it will be required to prepare a conflict resolution plan. Some relevant definitions have been provided in the footnotes to assist you in responding to this statement.

You are required to file this Reporting Statement within 30 days of beginning your employment with the regional center or from the date that you are appointed to the regional center board or advisory committee board. You are then required to file an annual Reporting Statement by August 1st of every year while you remain employed with the regional center or while you are a member of the regional center board or advisory committee board. You must also file a Reporting Statement within 30 days of any change in your status that could result in a conflict of interest. Circumstances that can constitute a change in your status that can require you to file an updated Reporting Statement are described below in footnote one.

Name: B		Regional Center: <u>Ea</u>	st Bay
Regional Center Position/Title:	☐ Governing Boa☐ Vendor Adviso☐ Contractor	ord Member ory Committee sitting on Board ☐ Agent	☐ Executive Director ☐ Employee ☐ Consultant
Reporting Status: If a change in status, date and	☐ Annual ☐ Change of Stated circumstance of circumstance		
2/3/20 RCEB employee be	came aware that	is employed by an RCEB ver	ndor (SVS in Concord).

consumers made eligible to receive Regional Center services.

¹ Change of status includes a previously unreported activity that should have been reported, change in the circumstance of a previously reported activity, change in financial interest, familial relationship, legal commitment, change in regional center position or duties, change in regional center, or change to outside position or duties. See California Code of Regulations, title 17, sections 54531(d) and 54532(d).



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H.R.

Governing Board Member
☐ Vendor Advisory on Board
☐ Executive Director
☑ Employee/Other

2. Do you or a family member² work for any entity or organization that is a regional center provider or contractor?

yes no -- If yes, provide the name of the entity or organization and describe what services it provides for the regional center or regional center consumers. If the provider or contractor is a state or local governmental entity, provide the specific name of the state or local governmental entity and describe your job duties at the state or local governmental entity.

Social Vocational Services, an adult day program located in Concord that focuses on providing RCEB adult consumers with Volunteer Opportunities, Job Training Opportunities, Social Skills and Community Outings and Recreational Activities.

3. Do you or a family member own or hold a position³ in an entity or organization that is a regional center provider or contractor? ves no -- If yes, provide the name of the entity or organization, describe what services it provides for the regional center or regional center consumers, and describe your or your family member's financial interest.

Social Vocational Services, an adult day program located in Concord that focuses on providing RCEB adult consumers with Volunteer Opportunities, Job Training Opportunities, Social Skills and Community Outings and Recreational Activities.

5. If you are a regional center advisory committee board member and answered yes to all the questions in Question 4 above, do any of the following apply to you: (a) are you an officer of the regional center board; (b) do you vote on purchasing services from a regional center provider; or (c) do you vote on matters where you might have a financial interest? yes no -- If yes, please explain.

² Family member includes your spouse, domestic partner, parents, stepparents, grandparents, siblings, stepsiblings, children, stepchildren, grandchildren, parent-in-laws, brother-in-laws, sister-in-laws, son-in-laws and daughter-in-laws. See California Code of Regulations, title 17, sections 54505(f)

³ For purposes of this question, hold a position generally means that you or a family member is a director, officer, owner, partner, employee, or shareholder of an entity or organization that is a regional center provider or contractor. For a specific description of positions that create a conflict of interest in a regional center provider or contractor see the California Code of Regulations, title 17, sections 54520 and 54526.

		La Employe	e/Other	j
6.	Do any of the decisions you make when performing your job duties with the regional cerfinancially benefit you or a family member ⁴ ? [Note: Governing board members do not hat question if the financial benefit would be available to regional center consumers or their factory yes of no If yes, please explain.	ve to answ	er "yes"	
7.	Are you responsible for negotiating, making, sexecuting or approving contracts on behinder? ☐ yes ☐ no If yes, please explain.	alf of the r	egional	
8.	Do you have a financial interest in any contract ⁶ with the regional center? ☐ yes ☐ no make, execute or approve the contract on behalf of the regional center? ☐ yes ☐ no			
9.	Do any of your family members have a financial interest in any contract with the regional If yes, did you negotiate, make, execute or approve the contract on behalf of the regional If yes, please explain.	center? center?	□ yes □ yes	

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⁴ Generally, a decision can financially benefit you or a family member if the decision can either directly or indirectly cause you or a family member to receive a financial gain or avoid a financial loss. For a specific description of the types of decisions that can result in a financial benefit to you or a family member see the California Code of Regulations, title 17, sections 54522 and 54527.

⁵ California Code of Regulations, title 17, sections 54523(b)(2) and 54528(b)(2) describes the types of conduct which constitute involvement in the making of a contract.

the making of a contract.

For purposes of questions 8 and 9, a financial interest in a contract generally means any direct or indirect interest in a contract that can cause you or a family member to receive any sort of financial gain or avoid any sort of financial loss irrespective of the dollar amount. California Code of Regulations, title 17, sections 54523 and 54528 define when financial interests in a contract will occur.

	☐ Executive Director ☐ Employee/Other
10. Do you evaluate employment applications or contract bids that are submitted by ges ☑ no If yes, please explain.	y your family member(s)?
11. Your job duties require you to act in the best interests of the regional center and have any circumstances or other financial interests not already discussed above in the best interests of the regional center or its consumers?	that would prevent you from acting
	4 440-48 (c)
B. ATTESTATION	
Statement are complete, true, and correct to the best of my information and believed information that might indicate that this statement is not accurate or that it is center's Conflict of Interest Policy or the applicable conflict of interest laws, I will not individual immediately. I understand that knowingly providing false information of Statement shall subject me to a civil penalty in an amount up to fifty thousand dollar institutions Code section 4626.	have not complied with the regional otify the regional center's designated on this Conflict of Interest Reporting
Signature Da	nte 02/04/2020
INTERNAL USE ONLY Date this Statement was received by Reviewer:	
The reporting individual does does not have a present	potential conflict of interest
Signature of Designated Reviewer	Date Review Completed
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