CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Initial Filing	
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Please type or print in ink.		Filing ID: 169643761
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Cassman, Joan L		
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
SAN MATEO COUNTY		
Division, Board, Department, District, if applicable	Your Position	
Mid Peninsula Water District	Attorney	
► If filing for multiple positions, list below or on an attachment. (Do not	ot use acronyms)	
Agency:*SEE ATTACHED FOR ADDITIONAL POSITIONS	Position:	
2. Jurisdiction of Office (Check at least one box)		
☐ State	Judge or Court Commissi	oner (Statewide Jurisdiction)
Multi-County	X County of <u>San Mateo</u>	
City of		
3. Type of Statement (Check at least one box)		
	Leaving Office: Data L	off / /
Annual: The period covered is January 1, 2017, through December 31, 2017	(Check one)	eft /
The period covered is/, through December 31, 2017	 The period covered leaving office. 	I is January 1, 2017, through the date of
Assuming Office: Date assumed//	 The period covered in of leaving office. 	s/, through the date
Candidate:Date of Election and office sough	nt, if different than Part 1:	
4. Schedule Summary (must complete) ► Total numb	per of pages including this cove	or page: 4
Schedules attached	ber of pages including this com	ei page.
X Schedule A-1 - Investments – schedule attached	X Schedule C - Income Loans	& Business Positions – schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income – Gifts	
Schedule B - Real Property – schedule attached		- Travel Payments – schedule attached
-or-	_	
□ None - No reportable interests on any schedule		
5. Verification		
MAILING ADDRESS STREET CI (Business or Agency Address Recommended - Public Document)	ry sta	TE ZIP CODE
3 Dairy Ln B	elmont CA	. 94002
(415) 995-5021	jcassman@hansonbridgett	aom
I have used all reasonable diligence in preparing this statement. I have	e reviewed this statement and to the best	
herein and in any attached schedules is true and complete. I acknow		loorroot
I certify under penalty of perjury under the laws of the State of C	amornia that the foregoing is true and	i coneci.
Date Signed _03/13/2018	Signature L Cassman	
(month, day, year)	(File the originally si	gned statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS COVER PAGE Expanded Statement Attachment

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FAIR POLITICAL PRACTICES COMMISSION

Name

Joan L Cassman

* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the	Cover Page.
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Agency	Division/Board/Dept/District	Position	Type of Statement
SAN MATEO COUNTY	Mid Peninsula Water District	Attorney	Annual 1/1/2017 - 12/31/2017
SAN MATEO COUNTY	Peninsula Traffic Congestion Relief Alliance	Attorney	Annual 1/1/2017 - 12/31/2017
San Mateo County	San Mateo County Transportation Authority	Attorney	Annual 1/1/2017 - 12/31/2017
San Mateo County	San Mateo County Transit District	Attorney	Annual 1/1/2017 - 12/31/2017

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

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Name

Cassman, Joan L

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
Vodafon Group	Pacific Gas and Electric		
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
Telecommunications	Energy		
FAIR MARKET VALUE	FAIR MARKET VALUE		
x \$2,000 - \$10,000 \$10,001 - \$100,000	X \$2,000 - \$10,000 \$10,001 - \$100,000		
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000		
NATURE OF INVESTMENT	NATURE OF INVESTMENT		
X Stock Other (Describe)	X Stock Other (Describe)		
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499		
○ Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More (<i>Report on Schedule C</i>)		
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
/			
ACQUIRED DISPOSED	ACQUIRED DISPOSED		
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
Microsoft Corp	Hanson Bridgett LLP		
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
Technology Products/Services	Legal Services		
FAIR MARKET VALUE	FAIR MARKET VALUE		
☐ \$2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000		
\$100,001 - \$1,000,000 Over \$1,000,000	X \$100,001 - \$1,000,000 Over \$1,000,000		
NATURE OF INVESTMENT	NATURE OF INVESTMENT		
X Stock Other	Stock Other		
(Describe)	(Describe)		
Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More (Report on Schedule C)	X Partnership ○ Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
/08 / 31 / 17			
ACQUIRED DISPOSED	ACQUIRED DISPOSED		
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
FAIR MARKET VALUE			
S2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000		
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000		
	NATURE OF INVESTMENT		
Stock Other(Describe)	Stock Other (Describe)		
(Describe) ■ Partnership ◯ Income Received of \$0 - \$499	Describe)		
 Income Received of \$500 or More (Report on Schedule C) 	○ Income Received of \$500 or More (<i>Report on Schedule C</i>)		
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
ACQUIRED DISPOSED	ACQUIRED DISPOSED		

Comments: _

011700170-NFH-0170

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

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Name

Cassman, Joan L

1. INCOME RECEIVED	► 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
Hanson Bridgett LLP			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
425 Market Street 26th Floor			
San Francisco, CA 94105			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
Legal Services			
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
Partner			
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position On		
□ \$500 - \$1,000 □ \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000		
□ \$10,001 - \$100,000	□ \$10,001 - \$100,000 □ OVER \$100,000		
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED		
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)		
X Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)		
Sale of	Sale of		
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)		
Loan repayment	Loan repayment		
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more		
(Describe)	(Describe)		
Other	Other		
(Describe)	(Describe)		

* 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)
ADDRESS (Business Address Acceptable)	%	None None	
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LC	DAN	sidence
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property _		Street address
\$500 - \$1,000 \$1,001 - \$10,000	-		City
<pre>\$10,001 - \$100,000</pre> OVER \$100,000	Other		(Describe)

Comments: _