É.			Received By Brandi Howard
CALIFORNIA FORM 700	STATEMENT (OF ECONOMIC INTERESTS	Date Initial Filing Receive
FAIR POLITICAL PRACTICES COMMISSION	(
	COVER PAGE A PUBLIC DOCUMENT		Legal Affairs Department
Please type or print in ink. NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Besikof	Rudolph	Joseph	(111222)
I. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
Laney College			
Division, Board, Department, District, if applica	ble	Your Position	
Peralta Community College Distric	t	Vice President of Instruction	n
► If filing for multiple positions, list below or o	on an attachment. (Do not u	use acronyms)	
Agency:		Position:	
. Jurisdiction of Office (Check at leas	t one box)		
☐ State		Judge or Court Commissioner (Sta	tewide Jurisdiction)
Multi-County			
. Type of Statement (Check at least on	e box)		
Annual: The period covered is January 1 December 31, 2018.	, 2018, through	Leaving Office: Date Left (Check one	
The period covered is/ December 31, 2018.	/, through	O The period covered is January -or- leaving office.	1, 2018, through the date of
Assuming Office: Date assumed	II	O The period covered is/ the date of leaving office.	, through
Candidate: Date of Election	and office sough	it, if different than Part 1:	
. Schedule Summary (must compl	ete) 🕨 Total numbe	r of pages including this cover pag	/e:
Schedules attached			
Schedule A-1 - Investments - schedule	e attached	Schedule C - Income, Loans, & Business	Positions - schedule attached
Schedule A-2 - Investments - schedule	e attached	Schedule D - Income - Gifts - schedule a	attached
Schedule B - Real Property – schedule	e attached	🗙 Schedule E - Income – Gifts – Travel Pay	ments - schedule attached
-or- 🗆 None - No reportable interests	on any schedule		
. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docum	CITY CITY	STATE	ZIP CODE
1517 Linden Street	Alameda	CA	94501
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(510) 464-3213		RBESIKOF@PERALTA.EDU	
I have used all reasonable diligence in preparing herein and in any attached schedules is true ar			wledge the information contained
I certify under penalty of perjury under the I	aws of the State of Califor	mia that the foregoing is true and correct.	111
Date Signed January 28 (month, day, year)	2019	Signature Choloff	nght with your filing official.)

1

e: 866/275-3772 www.fppc.ca.gov Page - 5 /

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name Rudolph Bosika

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
United Brotherhood of Carpenters	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
212 Carpenters Union Way	
CITY AND STATE	CITY AND STATE
Las Vegas, NV 89119	
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE Visit to Training Center	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 11 / 15 / 18 - 11 / 16 / 18 AMT: \$	DATE(S):// AMT: \$
► MUST CHECK ONE: Gift -or- 🔀 Income	► MUST CHECK ONE: Gift -or- Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	O Other - Provide Description
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/// AMT: \$	DATE(S):/// AMT: \$
► MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: Gift -or- Income
O Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
O Other - Provide Description	O Other - Provide Description
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination

Comments: The United Brotherhood invited a delegation from Peralta Community College District to tour their facility. They provided airfare, a night's lodging, four meals, and van transportation between the airport, hotel, and the training facility.

CALIFORNIA FORM 700	STATEMENT O	F ECONOMIC INTERESTS	Date Initial PINING Receive
FAIR POLITICAL PRACTICES COMMISSION	C	OVER PAGE	MAR 1 1 2020
Pieses tras or stist is isk		BLIC DOCUMENT	Legal Affairs
Please type or print in ink. NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Besikof	Rudolph	Joseph	
I. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
Laney College			
Division, Board, Department, District, if applica	ble	Your Position	
Peralta Community College District	t	Vice President of Instruction	
► If filing for multiple positions, list below or c	on an attachment. (Do not us	se acronyms)	
Agency:		Position:	
. Jurisdiction of Office (Check at leas	st one box)		
X State		Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)	
		County of Alameda	
Multi-County			
City of		Other	
. Type of Statement (Check at least of	ne box)		
Annual: The period covered is January December 31, 2019.	1, 2019, through	Leaving Office: Date Left (Check one of	
-or- The period covered is/_ December 31, 2019.	, through	O The period covered is January -or-	
Assuming Office: Date assumed	J	 The period covered is	/, through
Candidate: Date of Election			
	and office sough	t, if different than Part 1:	
Schedules attached			
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Please type or print in ink.	A			
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)		
BESIKOF RUDOLPH	JOSEPH			
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)				
PERALTA COMMUNITY COL	LEGE DISTRICT	PRESIDENT (LANEY COLLE	GE)	
Division, Board, Department, District, if	applicable	Your Position		
► If filing for multiple positions, list belo	ow or on an attachment. (Do	not use acronyms)		
Agency:		PRESIDENT		
2. Jurisdiction of Office (Check	at least one box)			
☐ State			Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)	
Multi-County		County of ALAMEDA	County of ALAMEDA	
City of		Other PERALTA COMMUN	ITY COLLEGE DISTRIC	
3. Type of Statement (Check at lo				
Annual: The period covered is Ja December 31, 2020.		Leaving Office: Date Left(Check one	circle.)	
December 31, 2020.	<i>/,</i> thro	leaving office. -or-		
Assuming Office: Date assumed	//	 The period covered is/. the date of leaving office. 	, through	
Candidate: Date of Election	and office s	sought, if different than Part 1:		
4. Schedule Summary (must c	omplete) 🕨 Total nui	mber of pages including this cover pag	e:	
Schedules attached				
Schedule A-1 - Investments - s	chedule attached	Schedule C - Income, Loans, & Business	Positions - schedule attached	
Schedule A-2 - Investments – s	chedule attached	Schedule D - Income - Gifts - schedule a	ittached	
Schedule B - Real Property - s	chedule attached	Schedule E - Income – Gifts – Travel Pay	ments - schedule attached	
-or- None - No reportable int	erests on any schedule			
5. Verification				
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pub	Cl'	TY STATE	ZIP CODE	
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
(510) 464-3236		rbesikof@peralta.edu		
herein and in any attached schedules is	true and complete. I acknow		wledge the information contained	
I certify under penalty of perjury under	er the laws of the State of C	alifornia that the foregoing is true and correct.		
Date Signed 03/30/2021 (month, day, yea	v)	Signature	and with your Elize - II-i-11	
(monun, day, yea		(File the originally signed paper statem	win win your ming omean.)	

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

Date Initial Filing Received Filing Official Use Only

Please type or print in ink.			
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
Besikof	Rudolph	Joseph	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
Peralta Community College Dist			
Division, Board, Department, District, if app	plicable	Your Position	
Laney College		President	
► If filing for multiple positions, list below	or on an attachment. (Do not use a	cronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Check at	least one box)		and the second of the second
State		Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)	
Multi-County		County of Alameda	
City of		Other Peralta Community C	ollege District
3. Type of Statement (Check at lea	ust one box)		
Annual: The period covered is Janu December 31, 2023.		Leaving Office: Date Left (Check one of	
-or- The period covered is December 31, 2023.	, through	The period covered is January of leaving office.	1, 2023, through the date
Assuming Office: Date assumed _	//	The period covered is/_ the date of leaving office.	, through
Candidate: Date of Election	and office sought, if	different than Part 1:	
4. Schedule Summary (required	l) ► Total number o	f pages including this cover pag	e:
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Schedule A-2 - Investments – scl		Schedule D - Income – Gifts – schedule a	
Schedule B - Real Property – sch	hedule attached	Schedule E - Income – Gifts – Travel Pay	ments – schedule attached
ar 🔲 Nama Na reportable inte	praeta an any pahadula		
-or- None - No reportable inte	rests on any schedule		
5. Verification MAILING ADDRESS STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Publi	lic Document)		
1517 Linden Street	Alameda	A CA	94501
(510) 4643237		rbesikof@peralta.edu	
	eparing this statement. I have reviewe	ed this statement and to the best of my kno	wledge the information contained
		a that the foregoing is true and correct.	
Date Signed March 18, 2024			hal
Date Signed March 18, 2024	Sig	(File the originally signed paper state)	ment with your filing official.)