

STATEMENT OF ECONOMIC INTERESTS

Received By  
Brandi Howard  
Date Initial Filing Received  
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MAR 19 2019

A PUBLIC DOCUMENT

Legal Affairs  
Department

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
HANDY LINDA L

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

PERALTA COMMUNITY COLLEGE DISTRICT

Division, Board, Department, District, if applicable

BOARD OF TRUSTEES, AREA 3

Your Position

TRUSTEE

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

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

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

- State  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of ALAMEDA
- City of \_\_\_\_\_  Other \_\_\_\_\_

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

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

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

Schedules attached

- Schedule A-1 - Investments - schedule attached  Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule A-2 - Investments - schedule attached  Schedule D - Income - Gifts - schedule attached
- Schedule B - Real Property - schedule attached  Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE

(Business or Agency Address Recommended - Public Document)

333 E. 8TH STREET

OAKLAND

CA

94606

DAYTIME TELEPHONE NUMBER

( 510 ) 213-0315

EMAIL ADDRESS

LHANDY@PERALTA.EDU

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 02/05/19  
(month, day, year)

Signature   
File the originally signed paper statement with your filing official.

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

Name  
LINDA HANDY

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME  
LINDA HANDY CONSULTING

ADDRESS (Business Address Acceptable)  
5353 FLEMING AVENUE

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
CONSULTANT SERVICES

YOUR BUSINESS POSITION  
RACIAL/DIALOGUE FACILITATOR

GROSS INCOME RECEIVED     No Income - Business Position Only  
 \$500 - \$1,000             \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 (For self-employed use Schedule A-2.)  
 Partnership (Less than 10% ownership. For 10% or greater use  
 Schedule A-2.)  
 Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)  
 Loan repayment  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 (Describe)  
 Other \_\_\_\_\_  
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME  
Focal Points Designs

ADDRESS (Business Address Acceptable)  
5353 FLEMING AVE

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
JEWELRY DESIGN

YOUR BUSINESS POSITION  
DESIGNER

GROSS INCOME RECEIVED     No Income - Business Position Only  
 \$500 - \$1,000             \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 (For self-employed use Schedule A-2.)  
 Partnership (Less than 10% ownership. For 10% or greater use  
 Schedule A-2.)  
 Sale of HANDMADE JEWELRY  
 (Real property, car, boat, etc.)  
 Loan repayment  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 (Describe)  
 Other \_\_\_\_\_  
 (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  
 \$1,001 - \$10,000  
 \$10,001 - \$100,000  
 OVER \$100,000

INTEREST RATE \_\_\_\_\_%     None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN  
 None     Personal residence  
 Real Property \_\_\_\_\_  
 Street address \_\_\_\_\_  
 City \_\_\_\_\_  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
 (Describe)

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

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FEB 04 2020

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) Department  
HANDY LINDA Legal Affairs

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
PERALTA COMMUNITY COLLEGE DISTRICT  
Division, Board, Department, District, if applicable Your Position  
BOARD OF TRUSTEES TRUSTEE

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

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

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

- State  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of ALAMEDA
- City of \_\_\_\_\_  Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2019, through December 31, 2019.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one circle.)
- or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2019.  The period covered is January 1, 2019, through the date of leaving office.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

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

Schedules attached

- Schedule A-1 - Investments - schedule attached  Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule A-2 - Investments - schedule attached  Schedule D - Income - Gifts - schedule attached
- Schedule B - Real Property - schedule attached  Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
333 EAST 8TH STREET OAKLAND CA 94606  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 510 ) 466-7202 LHANDY@PERALTA.EDU

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/4/2020  
(month, day, year)

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

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Handy Linda L

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Peralta Community College District  
Division, Board, Department, District, if applicable Your Position

Board of Trustees Trustee

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position:

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

- State  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- Multi-County  County of Alameda
- City of  Other

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

- Annual: The period covered is January 1, 2020, through December 31, 2020. -or- The period covered is through December 31, 2020.
- Leaving Office: Date Left (Check one circle.)
  - The period covered is January 1, 2020, through the date of leaving office.
  - The period covered is through the date of leaving office.
- Assuming Office: Date assumed
- Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete)

► Total number of pages including this cover page:

Schedules attached

- Schedule A-1 - Investments - schedule attached  Schedule C - Income, Loans, & Business Positions - schedule attached
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- Schedule B - Real Property - schedule attached  Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)

333 East 8th street

DAYTIME TELEPHONE NUMBER

(510 ) 466-7202

EMAIL ADDRESS

Lhandy@peralta.edu

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/22/21 (month, day, year)

Signature [Handwritten Signature]

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

Print Clear

**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)  
Handy Linda L

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

Agency Name (Do not use acronyms)  
Peralta Community College District  
Division, Board, Department, District, if applicable Board of Trustees  
Your Position Trustee  
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

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

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

State  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of \_\_\_\_\_  
 City of \_\_\_\_\_  Other \_\_\_\_\_

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

Annual: The period covered is January 1, 2021, through December 31, 2021.  
-or- The period covered is \_\_\_\_\_ through December 31, 2021.  
 Assuming Office: Date assumed \_\_\_\_\_  
 Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_  
 Leaving Office: Date Left \_\_\_\_\_ (Check one circle.)  
 The period covered is January 1, 2021, through the date of leaving office.  
-or-  
 The period covered is \_\_\_\_\_ through the date of leaving office.

**4. Schedule Summary (must complete)**

▶ Total number of pages including this cover page: 2

**Schedules attached**

Schedule A-1 - Investments - schedule attached  Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule A-2 - Investments - schedule attached  Schedule D - Income - Gifts - schedule attached  
 Schedule B - Real Property - schedule attached  Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
333 East 8th street Oakland CA 94606  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 510 ) 213-0315 Handy4trustee@aol.com

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 02/24/2022  
(month, day, year)

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

Print Clear

# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b>
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <u>Linda L Handy</u>

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Linda Handy Consultant Services

ADDRESS (Business Address Acceptable)  
5353 Fleming Avenue Oakland CA 94619

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Consultant Services

YOUR BUSINESS POSITION  
Consultant

GROSS INCOME RECEIVED  No Income - Business Position Only  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)  
 Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Loan repayment  
 Commission or  Rental Income, list each source of \$10,000 or more  
(Describe)  
 Other \_\_\_\_\_  
(Describe)

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED  No Income - Business Position Only  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)  
 Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Loan repayment  
 Commission or  Rental Income, list each source of \$10,000 or more  
(Describe)  
 Other \_\_\_\_\_  
(Describe)

**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  
 \$1,001 - \$10,000  
 \$10,001 - \$100,000  
 OVER \$100,000

INTEREST RATE \_\_\_\_\_%     None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN  
 None       Personal residence  
 Real Property \_\_\_\_\_  
Street address  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

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

**Print**      **Clear**