



STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

1081294

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Shorett, Fred			

1. Office, Agency, or Court

Agency Name (Do not use acronyms) _____
 City of San Bernardino _____
 Division, Board, Department, District, if applicable _____ Your Position _____
 City Council _____ Council Member _____

► 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)

<input type="checkbox"/> State	<input type="checkbox"/> Judge or Court Commissioner (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input type="checkbox"/> County of _____
<input checked="" type="checkbox"/> City of San Bernardino	<input type="checkbox"/> Other _____

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

<input checked="" type="checkbox"/> Annual: The period covered is January 1, 2015, through December 31, 2015	<input type="checkbox"/> Leaving Office: Date Left ____/____/____ (Check one)
-or-	<input type="radio"/> The period covered is January 1, 2015, through the date of leaving office.
The period covered is ____/____/____, through December 31, 2015	<input type="radio"/> The period covered is ____/____/____, through the date of leaving office.
<input type="checkbox"/> Assuming Office: Date assumed ____/____/____	
<input type="checkbox"/> Candidate: Election Year _____ and office sought, if different than Part 1: _____	

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 5

Schedules attached

<input checked="" type="checkbox"/> Schedule A-1 - Investments – schedule attached	<input checked="" type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached
<input type="checkbox"/> Schedule A-2 - Investments – schedule attached	<input type="checkbox"/> Schedule D - Income – Gifts – schedule attached
<input type="checkbox"/> Schedule B - Real Property – schedule attached	<input type="checkbox"/> 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
<i>(Business or Agency Address Recommended - Public Document)</i>				
300 North "D" Street		San Bernardino	CA	92418
DAYTIME TELEPHONE NUMBER			E-MAIL ADDRESS	
(909) 384-5188			fredshorett@charter.net	

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 03/31/2016
(month, day, year)

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

SCHEDULE A-1 Investments

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

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Shorett, Fred

▶ NAME OF BUSINESS ENTITY
Bank of America

GENERAL DESCRIPTION OF THIS BUSINESS
Banking/ Financial

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

 ACQUIRED DISPOSED

Comments: _____

SCHEDULE C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Shorett, Fred

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Fred Shorett
ADDRESS (Business Address Acceptable)
420 Edgerton Dr.
San Bernardino, CA 92405
BUSINESS ACTIVITY, IF ANY, OF SOURCE

Sales Consulting

YOUR BUSINESS POSITION

Selfemployed

GROSS INCOME RECEIVED

- \$500 - \$1,000
- \$1,001 - \$10,000
- \$10,001 - \$100,000
- OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- Salary
- Spouse's or registered domestic partner's income (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

Inland Valley Development Agency
ADDRESS (Business Address Acceptable)
1601 E. 3rd St.
San Bernardino, CA 92408
BUSINESS ACTIVITY, IF ANY, OF SOURCE

Government Agency (JPA)

YOUR BUSINESS POSITION

Board Member

GROSS INCOME RECEIVED

- \$500 - \$1,000
- \$1,001 - \$10,000
- \$10,001 - \$100,000
- OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- Salary
- Spouse's or registered domestic partner's income (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 Stioend
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

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

NAME OF LENDER*

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: _____

SCHEDULE C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Shorett, Fred

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
San Bernardino Int'l. Airport Authority
ADDRESS (Business Address Acceptable)
1601 E. 3rd. St.
San Bernardino, CA 92408
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Airport Authority (JPA)
YOUR BUSINESS POSITION
Board Member
GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
(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 Stipend
(Describe)

NAME OF SOURCE OF INCOME
City of San Bernardino
ADDRESS (Business Address Acceptable)
300 N. "D" St.
San Bernardino, CA 92418
BUSINESS ACTIVITY, IF ANY, OF SOURCE
City Government
YOUR BUSINESS POSITION
Elected Official
GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
(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 Salary/ Expenses
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

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

NAME OF LENDER* _____
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: _____

