

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT**

AUG 08 2024

City of Livermore

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Kaskey Jeffrey

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Livermore

Division, Board, Department, District, if applicable

City Council Member District 3

Your Position

► 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 Livermore

Other _____

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

Annual: The period covered is January 1, 2023, through
December 31, 2023.

Leaving Office: Date Left _____
(Check one circle.)

-or-

The period covered is _____, through
December 31, 2023.

The period covered is January 1, 2023, through the date
of leaving office.

-or-

Assuming Office: Date assumed _____

The period covered is _____, through
the date of leaving office.

Candidate: Date of Election 11/5/2024 and office sought, if different than Part 1: _____

4. Schedule Summary (required)

► Total number of pages including this cover page: 3

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)

585 S K St

Livermore

CA

94550

DAYTIME TELEPHONE NUMBER

(510) 816 9542

EMAIL ADDRESS

jkaskey@yahoo.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 8/7/2024
(month, day, year)

Signature [Signature]
(Filed on originally signed paper statement with your filing official.)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name _____

1. BUSINESS ENTITY OR TRUST	
Name <u>Red Vinyl Unlimited dba The Last Factory</u>	
Address (Business Address Acceptable) <u>2011 Research Dr Livermore CA</u>	
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF THIS BUSINESS <u>Manufacturer of Audio Accessories</u>	
FAIR MARKET VALUE \$0 - \$1,999 <u>\$2,000 - \$10,000</u> <u>\$10,001 - \$100,000</u> \$100,001 - \$1,000,000 Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/23 ____/_____/23 ACQUIRED DISPOSED
NATURE OF INVESTMENT Partnership Sole Proprietorship <u>LLC</u> Other _____	
YOUR BUSINESS POSITION <u>CEO/owner</u>	
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
\$0 - \$499 <u>\$10,001 - \$100,000</u> \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below	
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box: INVESTMENT REAL PROPERTY <u>N/A</u> <u>N/A</u>	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property _____	
Description of Business Activity or City or Other Precise Location of Real Property _____	
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/23 ____/_____/23 ACQUIRED DISPOSED
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership Leasehold _____ Other _____ Yrs. remaining _____	
Check box if additional schedules reporting investments or real property are attached	

1. BUSINESS ENTITY OR TRUST	
Name _____	
Address (Business Address Acceptable) _____	
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF THIS BUSINESS	
FAIR MARKET VALUE \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/23 ____/_____/23 ACQUIRED DISPOSED
NATURE OF INVESTMENT Partnership Sole Proprietorship Other _____	
YOUR BUSINESS POSITION _____	
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below	
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box: INVESTMENT REAL PROPERTY	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property _____	
Description of Business Activity or City or Other Precise Location of Real Property _____	
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/23 ____/_____/23 ACQUIRED DISPOSED
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership Leasehold _____ Other _____ Yrs. remaining _____	
Check box if additional schedules reporting investments or real property are attached	

Comments: _____

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name _____

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME <u>Red Vinyl Unlimited</u>	
ADDRESS (Business Address Acceptable) <u>2011 Research Dr.</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Mfr of audio accessories</u>	
YOUR BUSINESS POSITION <u>CEO</u>	
GROSS INCOME RECEIVED	No Income - Business Position Only
\$500 - \$1,000	<u>\$1,001 - \$10,000</u>
\$10,001 - \$100,000	OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
<u>Salary</u>	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	TERM (Months/Years)
_____%	None _____
SECURITY FOR LOAN	
None	Personal residence
Real Property	_____ Street address
	_____ City
Guarantor	_____
Other	_____ (Describe)

Comments: _____