Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Filing Official Use Only

COVER PAGE

Filed Date: 03/28/2022 10:32 PM

SAN: FPPC

NAME OF FILER	(LAST)		(FIRST)		(MIDDLE)
Broadway		Kenneth		Α	
I. Office, Ager	ncy, or Court				
Agency Name ((Do not use acronyms)				
City of Rock	din				
Division, Board,	Department, District, if applicable		Your Po	osition	
			City	Council Member	
► If filing for m	ultiple positions, list below or on an attachm	ent. (Do not	use acronyms)		
Agency:			Positio	on:	
2. Jurisdiction	of Office (Check at least one box)				
State				e, Retired Judge, Pro Ter wide Jurisdiction)	n Judge, or Court Commissioner
Multi-County			_ Coun	ty of	
City of Roc				•	
	tement (Check at least one box)				
	he period covered is January 1, 2021, throu ecember 31, 2021.	gh	∐ Leav		ck one circle.)
Tł	ne period covered is// ecember 31, 2021.	, through	l	The period covered is Jar eaving office.	nuary 1, 2021, through the date of
Assuming (Office: Date assumed//			The period covered is he date of leaving office.	/, through
Candidate:	Date of Electionand	office sought,			
		Total numbe	er of pages in	ncluding this cover	page:2
Schedules	attacned				
Schedul	le A-1 - Investments - schedule attached		Schedule C	- Income, Loans, & Busi	iness Positions - schedule attached
_	le A-2 - Investments – schedule attached		_	- Income - Gifts - sche	
	le B - Real Property – schedule attached		Schedule E	- Income – Gifts – Trave	el Payments – schedule attached
-or- ☐ <i>None</i> - <i>N</i>	No reportable interests on any sched	dule			
5. Verification					
MAILING ADDRESS	STREET Address Recommended - Public Document)	CITY		STATE	ZIP CODE
3970 Rockli	·	Rocklin		CA	95677-2720
DAYTIME TELEPHO	NE NUMBER		E-MAIL ADDRES	S	
()					
	easonable diligence in preparing this statem by attached schedules is true and complete.				/ knowledge the information contained
I certify under	penalty of perjury under the laws of the	State of Califo	ornia that the for	regoing is true and cor	rect.
Date Signed	03/28/2022 10:32 PM		Signature	Kenneth	n A Broadway
Date digited	(month, day, year)		g.iatalo	(File the originally signed pape	er statement with your filing official.)

SCHEDULE D Income - Gifts



► NAME OF SOURCE (Not an Acronym)		► NAME OF SOURCE	E (Not an Acronvm)	
Taylor Builders		11	ment Corporation	on
ADDRESS (Business Address Acceptable	e)		ss Address Acceptab	
BUSINESS ACTIVITY, IF ANY, OF SOU	RCE	BUSINESS ACTIVI	TY, IF ANY, OF SO	URCE
Residential Real Estate Deve	loper	Real Estate F	irm	
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 , 20 , 21</u>	Dinner	10,21,21	\$	Dinner
\$			\$	
\$			\$	
▶ NAME OF SOURCE (Not an Acronym)		► NAME OF SOURC	E (Not an Acronym)	
ADDRESS (Business Address Acceptable	·)	ADDRESS (Busines	ss Address Acceptab	le)
BUSINESS ACTIVITY, IF ANY, OF SOU	RCE	BUSINESS ACTIVI	TY, IF ANY, OF SO	URCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/\$			\$	
/\$			\$	
\$			\$	
▶ NAME OF SOURCE (Not an Acronym)		Filer's Verifica		
ADDRESS (Business Address Acceptable)	Print Name Kenne Office, Agency Cit		
BUSINESS ACTIVITY, IF ANY, OF SOU	RCE	or Court	y Of ROCKIII	
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	Statement Type	2021/2022 Annu Annual	Assuming Leaving Candidate
/\$		I have used all reason reviewed this statem	onable diligence in ent and to the best	preparing this statement. I have of my knowledge the information
/\$			nalty of perjury u	schedules is true and complete. Inder the laws of the State of and correct.
/\$		Date Signed	03/28/2	022 10:32 PM
		Date Signed	(monti	h, day, year)
		Filer's Signature _	Kenne	eth A Broadway

Comments: __



(month, day, year)

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Official Use Only

Filed Date: 03/06/2022 11:50 AM SAN: FPPC

Please type or print in	ink.			
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	
Broadway	Kenneth	n	Α	
1. Office, Agency	, or Court			
Agency Name (Do	not use acronyms)			
City of Rocklin				
Division, Board, Dep	partment, District, if applicable	Your P	osition	
		City	Council Member	
▶ If filing for multip	le positions, list below or on an attachment		Courton Wernber	
,g		(20 //ot 000 00/0///////		
Agency:		Position	on:	
) lumia diation o	f Office (a)			
2. Jurisaiction of	f Office (Check at least one box)	_		
State		_	e, Retired Judge, Pro Tem consider Jurisdiction)	Judge, or Court Commissioner
Multi-County		☐ Coun	ty of	
➤ City of Rockli				
3. Type of State	ment (Check at least one box)			
	period covered is January 1, 2021, through	☐ Lea	ving Office: Date Left	
-or-	mber 31, 2021 .		(Check or	,
·	period covered is// mber 31, 2021 .	, unougn	eaving office.	ary 1, 2021, through the date of
Assuming Offi	ce: Date assumed/		The period covered is the date of leaving office.	/, through
Candidate: Da	ate of Election and	office sought, if different that	ın Part 1:	
4. Schedule Sum	nmary (must complete) > Tot	al number of pages in	ncluding this cover n	aue. o
Schedules at	• • • • • • • • • • • • • • • • • • • •	ar nambor of pagoo n	roldanig and dover po	age: <u>3</u>
× Schedule A	-1 - Investments – schedule attached	Schedule C	- Income, Loans, & Busine,	ss Positions – schedule attached
_	-2 - Investments – schedule attached		- Income - Gifts - schedule	
	- Real Property – schedule attached			Payments - schedule attached
		_		
-or- ☐ None - I	No reportable interests on any sche	edule		
5. Verification				
MAILING ADDRESS (Business or Agency Add	STREET Iress Recommended - Public Document)	CITY	STATE	ZIP CODE
3970 Rocklin F	Rd	Rocklin	CA	95677-2720
DAYTIME TELEPHONE I	NUMBER	EMAIL ADDRES	S	
()				
	onable diligence in preparing this statement ttached schedules is true and complete. I			nowledge the information contain
•	alty of perjury under the laws of the Sta			^
r certify under pen	any or perjury uniter the laws or the Sta	ne or Camornia that the 10	regoing is true and correc	·L.
Date Signed	03/06/2022 11:50 AM	Signature	Kenneth A	A Broadway

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

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

Investments must be itemized. Do not attach brokerage or financial statements. CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Kenneth Broadway

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
AT&T	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Communications Company	
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	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership (Income Received of \$0 - \$499	(Describe) Partnership (Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
United Parcel Service GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL BESONN HON OF THIS BOSINESS
Transportation Company	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$\infty\$ \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000
■ \$100,001 - \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More (Report on Schedule C)
O mosmic received of speed of more proportion conceans by	The module received of specie of mode proposition economic ex
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 21 , , 21	, , 21 , , 21
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Zions Bancorporation	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial Institution	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Olncome Received of \$0 - \$499 Olncome Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
•	-

Comments: _

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Broadway

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
United Parcel Service	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transportation Company	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Corporate Pricing Manager	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000\$1,001 - \$10,000
■ \$10,001 - \$100,000 × OVER \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
Sale of(Real property, car, boat, etc.)	Sale of(Real property, car, boat, etc.) 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)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING	PERIOD
a retail installment or credit card transaction, made in t	I lending institution, or any indebtedness created as part of he lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	%
ADDRESS (Business Address Acceptable)	OF CURITY FOR LOAD
	SECURITY FOR LOAN None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
<u>\$500 - \$1,000</u>	City
\$1,001 - \$10,000	·
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
	Other(Describe)
Comments:	

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Date Initial Filing Received Filing Official Use Only

A PUBLIC DOCUMENT Filed Date: 01/12/2021 02:03 PM SAN: FPPC Please type or print in ink. NAME OF FILER (LAST) (FIRST) (MIDDLE) **Broadway** A Kenneth 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Rocklin Division, Board, Department, District, if applicable Your Position City 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) State Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) Multi-County County of X City of Rocklin Other 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2020, through Leaving Office: Date Left ___ December 31, 2020. (Check one circle.) The period covered is ____/__/ The period covered is January 1, 2020, through the date of leaving office. December 31, 2020. -or-O The period covered is _ Assuming Office: Date assumed ____ the date of leaving office. and office sought, if different than Part 1: ___ Candidate: Date of Election __ 4. Schedule Summary (must complete) ► Total number of pages including this cover page: Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached -or- None - No reportable interests on any schedule 5. Verification MAILING ADDRESS ZIP CODE (Business or Agency Address Recommended - Public Document) 3970 Rocklin Rd Rocklin CA 95677-2720 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS 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	01/12/2021 02:03 PM	Signature	Electronic Submission	
	(month, day, year)		(File the originally signed paper statement with your filing official.)	

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

Investments must be itemized. Do not attach brokerage or financial statements

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name Kenneth Broadway

	Do not allaon brokerage	or mandar statements.
•	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	AT&T	
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	Communications Company	
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	Stock Other(Describe)	Stock Other(Describe)
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	, , 20 , , 20	, , 20 , , 20
_	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	United Parcel Service	The state of the s
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	Transportation Company	
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000 \$\overline{X}\$ \$100,001 - \$1,000,000 \$Over \$1,000,000	\$2,000 - \$10,000
	(X) \$100,001 - \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	Stock Other (Describe)	Stock Other (Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	O meditic received of wood of whole (report on schedule of	O modifie Necessed of \$500 of World (Nepolt of Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
•	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	Zions Bancorporation	
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	Financial Institution	
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	Stock Other (Describe)	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 (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED	ACQUIRED DISPOSED

Comments:

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Broadway

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
United Parcel Service	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transportation Company	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Corporate Pricing Manager	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,000	GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 X OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
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.)
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(Describe)	Other(Describe)
► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	ERIOD
a retail installment or credit card transaction, made in the	lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	% None
ADDRESS (Business Address Acceptable)	CECUDITY FOR LOAN
	SECURITY FOR LOAN None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
	Other(Describe)
Comments:	

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Date Signed

STATEMENT OF ECONOMIC INTERES **COVER PAGE**

A PUBLIC DOCUMENT

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	1	1111	3	n	202	n		
Ш	(1)	ile	~	V	202	2	Щ	

Please type or print in ink. NAME OF FILER (LAST) (FIRST) Kenneth Alan **Broadway** 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Rocklin Division, Board, Department, District, if applicable Your Position City Council ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Position: _ Agency: __ 2. Jurisdiction of Office (Check at least one box) ☐ State ☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) County of ■ Multi-County Other ✓ City of Rocklin 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2019, through Leaving Office: Date Left ____/_ (Check one circle.) December 31, 2019. -or- The period covered is January 1, 2019, through the date of The period covered is _____/___, through leaving office. December 31, 2019. O The period covered is _______, through Assuming Office: Date assumed ____/__ the date of leaving office. Candidate: Date of Election 11/3/2020 and office sought, if different than Part 1: __ 4. Schedule Summary (must complete) > Total number of pages including this cover page: 3 Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached **-or-** None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STATE ZIP CODE STREET (Business or Agency Address Recommended - Public Document) EMAIL ADDRESS WE TELEFFIUNE NUMBER 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

Signature

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

Investments must be itemized.

CALIFORNIA FO	
Name	TICES COMMISSION
Kenneth	Broading

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
AT&T	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Communications Company	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$\sqrt{\$10,001} - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
MATRIDE OF INVESTMENT	NATURE OF INVESTMENT
NATURE OF INVESTMENT ✓ Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	Income Necessed of \$500 of World Report of Screeding Cy
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	// 19
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
United Parcel Service	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Transportation Company	
Transportation Company	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
▼ \$100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
✓ Stock Other	Stock Other (Describe)
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Zion Bancorporation	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial Institution	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$\sqrt{\$10,001} - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
✓ Stock Other	Stock Other
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 10	/ / / 40
//	/
	I San Sold
Comments:	

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

CALIFORNIA	FORM 700
I de la visita de la compania del compania del compania de la compania del compania del compania de la compania del compan	RACTICES COMMISSION
Name	
Kenneth	Brado

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
United Parcel Service	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2275 Sierra Meadows Drive ROcklin, CA 95765	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transporation Company	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Corporate Pricing Manager	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
☐ \$10,001 - \$100,000	S10,001 - \$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.)
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 (Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F	PERIOD
a retail installment or credit card transaction, made in the	I lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Assertable)	%
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN
DUDINESS ASTRUTY IF ANY OF LENDER	None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	
	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD	Short dayou
S500 - \$1,000	City
\$1,001 - \$10,000	Guarantar
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	(Describe)
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

COVER PAGE

A PUBLIC DOCUMENT

Filed Date: 04/08/2019 02:48 PM SAN: FPPC

NAME OF FILER (LAS	ST)	(FIRST)			(MIDDLE)
Broadway		Kenneth		Α	
. Office, Agen	ncy, or Court				
Agency Name ((Do not use acronyms)				
City of Rock	din				
Division, Board,	Department, District, if applicable		Your Po	osition	
			City (Council Member	
► If filing for mu	ultiple positions, list below or on an attach	ment. (Do not	use acronyms)		
Agency:			Positio	n:	
Jurisdiction	of Office (Check at least one box)				
State State	,		☐ Judge	or Court Commissioner	(Statewide Jurisdiction)
☐ Multi-County			_ Count	y of	
City of Roo	cklin		_		
. Type of Sta	tement (Check at least one box)				
_	ne period covered is January 1, 2018, three	ough	☐ Leav		
-or-	ecember 31, 2018.				one circle.)
	ne period covered is/	, through	h O Ti -or- ^{le}	he period covered is Jan aving office.	uary 1, 2018, through the date of
Assuming (Office: Date assumed/			he period covered is e date of leaving office.	
☐ Candidate:	Date of Election	and office sou		•	
			9,		
		Total numb	er of pages in	cluding this cover	page:4
Schedules	attached				
Schedule	e A-1 - Investments - schedule attached		X Schedule C -	Income, Loans, & Busin	ess Positions - schedule attached
☐ Schedule	e A-2 - Investments - schedule attached		Schedule D -	Income - Gifts - schedu	ule attached
Schedule	e B - Real Property - schedule attached		Schedule E -	Income – Gifts – Travel	Payments - schedule attached
or- 📙 None	- No reportable interests on any	schedule			
Verification					
MAILING ADDRESS (Business or Agency	STREET Address Recommended - Public Document)	CITY		STATE	ZIP CODE
3970 Rockli		Rocklin		CA	95677-2720
DAYTIME TELEPHO			EMAIL ADDRESS		
9					
	easonable diligence in preparing this stater by attached schedules is true and complete				knowledge the information contained
I certify under p	penalty of perjury under the laws of the	State of Calif	fornia that the for	egoing is true and corre	ect.
Date Signed	04/08/2019 02:48 PM		Signature	Electronic	C Submission
	(month, day, year)			(File the originally signed paper	statement with your filing official.)

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

Investments must be itemized.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Broadway

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
AT&T	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Communications Company	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other (Describe)
(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>, , 18</u> <u>, , 18</u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
United Parcel Service	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Transportation Company	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
■ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Zions Bancorporation	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial Institution	
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 <a>※ \$10,001 - \$100,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	☐ Stock ☐ Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe)
○ Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 18 , , 18	, , 18 , , 18
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Tolling	
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Broadway

➤ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
United Parcel Service	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transportation Company	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Corporate Pricing Manager	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 X OVER \$100,000	S10,001 - \$100,000 DVER \$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.)
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.) Loan repayment	(Real property, car, boat, etc.) 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(Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the	lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	%
ADDRESS (Business Address Acceptable)	OFFILIPITY FOR LOAN
	SECURITY FOR LOAN None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	<u>_</u>
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
_	Other(Describe)
Comments:	
voiiiiioiilo	

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**



dease type or print in in	K.			The second secon
AME OF FILER (LAST)		(FIRST)		(MIDDLE)
Broadway		Kenneth		Α
. Office, Agency, o	or Court			
Agency Name (Do not	use acronyms)			
City of Rocklin				
Division, Board, Depart	ment, District, if applicable		Your Position	
			Rocklin Council Member	
▶ If filing for multiple p	positions, list below or on an attachme	ent. (Do not use ac	ronyms)	
Agency:			Position:	
. Jurisdiction of C	Office (Check at least one box)		191	
☐ State			☐ Judge or Court Commissioner (S	Statewide Jurisdiction)
☐ Multi-County			County of	
			Other	
City of			U Otner	
. Type of Stateme	ent (Check at least one box)			
X Annual: The perio	od covered is January 1, 2017, throug	h	Leaving Office: Date Left	
Decembe	er 31, 2017.		(Check one)	
	od covered is/	, through	 The period covered is Janual leaving office. 	ary 1, 2017, through the date of
Assuming Office:	Date assumed//		The period covered is the date of leaving office.	, through
☐ Candidate: Date	of Election an	d office sought, if di	fferent than Part 1:	
Schedule Summ	ary (must complete) > 7	otal number of	name including this cover n	200: 4
Schedules atta		otai number or	pages including and cover p	aye
Schedule A-1 -	· Investments - schedule attached	⋉ Sc	hedule C - Income, Loans, & Busine	ss Positions - schedule attached
Schedule A-2 -	Investments - schedule attached	⋉ Sc	hedule D - Income - Gifts - schedule	e attached
☐ Schedule B - F	Real Property - schedule attached	☐ Sc	hedule E - Income – Gifts – Travel F	Payments - schedule attached
or-				
☐ None - No rep	ortable interests on any sched	ule		
Verification				
MAILING ADDRESS	STREET Recommended - Public Document)	CITY	STATE	ZIP CODE
3970 Rocklin Rd	Troublinoided - Fabile Bounning	Rocklin	CA	95677-2720
DAYTIME TELEPHONE NUM	BER		AIL ADDRESS	
		Ke	n.broadway@rocklin.ca.us	
	ble diligence in preparing this stateme thed schedules is true and complete.			knowledge the information contains
-	of perjury under the laws of the S			*
Date Signed	2018	Signa	ture	
	(month, day, year)		(File the originally signed state	ement with your filing official.)

Attachment to Cover Page FPPC Form 700 Annual Statement 2018

- Office, Agency, or Court (cont'd (multiple positions))
 - Placer County City Selection Committee Board Member (Placer County)
 - Placer County Flood Control and Drainage District Board Board Member (Placer County)
 - Placer County Transportation Planning Agency Board Board Member (Placer County)
 - Sacramento Area Council of Governments Board Alternate Board Member (Placer County)
 - South Placer Regional Transportation Authority Board Board Member (Placer County)
 - Western Placer Waste Management Authority Board Alternate Board Member (Placer County)

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

	LIFORNIA FORM 700
Na	
11/-	nneth Broadway

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
United Parcel Service	AT&T
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Transportation Company	Communications Company
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
▼ \$100,001 - \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Zions Bancorporation	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial Institution	
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	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule	Partnership O Income Received of \$0 - \$499 C) Income Received of \$500 or More (Report on Schedule C)
<u> </u>	S manus instance of these of more propose on conscision of
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//_17//_17	/ / 17 / 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	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Sto,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
□ Stock □ Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule of	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// 17// 17	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	NORTHED DIGITORS
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Broadway

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
United Parcel Service	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transportation Company	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Corporate Pricing Manager	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
☐ \$10,001 - \$100,000 🕱 OVER \$100,000	S10,001 - \$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.)
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
(Don't L)	(Davida)
(Describe)	(Describe)
Other (Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	IOD
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
,	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	City
\$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000 	
OVER \$100,000	Other(Describe)
	(Lescabe)
Comments:	

SCHEDULE D Income - Gifts

Kenneth Broadway

				The second secon	
NAME OF SOURCE			► NAME OF SOURCE	E (Not an Acrony	/m)
North State B	uilding Industry	/ Association			
ADDRESS /Rusines	es Address Assentab	(a)	ADDRESS (Busines	s Address Accep	otable)
BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	Y, IF ANY, OF S	SOURCE
	IA Installation I				
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 , 20 , 17	\$125.00	Dinner		\$	
	\$			\$	_
	\$			\$	_
NAME OF SOURCE	E (Not an Acronym)		► NAME OF SOURCE	(Not an Acrony	rm)
ADDRESS (Busines	ss Address Acceptab	le)	ADDRESS (Busines	s Address Accep	otable)
BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	Y, IF ANY, OF S	COURCE
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$			\$	
	\$			\$	_
	\$			\$	_
NAME OF SOURCE	E (Not an Acronym)		NAME OF SOURCE	(Not an Acrony	m)
ADDRESS (Busines	ss Address Acceptab	le)	ADDRESS (Busines	s Address Accep	otable)
BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	Y, IF ANY, OF S	OURCE
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	-		\$	
	\$			\$	_
	\$			\$	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

COVER PAGE

Filed Date: 01/16/2017 02:49 PM SAN: FPPC

Please type or print in ink.		SAN. TFFC
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Broadway	Kenneth	Α
1. Office, Agency, or Court	· · · · · · · · · · · · · · · · · · ·	
Agency Name (Do not use acronyms)		
City of Rocklin		
Division, Board, Department, District, if applicable	Your Position	
	City Council M	/lember
▶ If filing for multiple positions, list below or on an att	achment. (Do not use acronyms)	
Agency:	Position:	
2. Jurisdiction of Office (Check at least one b	ox)	
☐ State	☐ Judge or Court C	Commissioner (Statewide Jurisdiction)
Multi-County	County of	
City of Rocklin		
City of	Other	
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2016, December 31, 2016.	through Leaving Office: (Check one)	Date Left/
The period covered is/	, through O The period c	covered is January 1, 2016, through the date of e.
Assuming Office: Date assumed/	O The period c	covered is/, through eaving office.
Candidate: Election year	and office sought, if different than Part 1:	
4. Schedule Summary (must complete)	► Total number of pages including t	this cover page:3
Schedules attached	, ,	, ,
Schedule A-1 - Investments – schedule attach	ed Schedule C - Income I	oans, & Business Positions - schedule attached
Schedule A-2 - Investments - schedule attach		
Schedule B - Real Property – schedule attache		Gifts - Travel Payments - schedule attached
-or-	_	
☐ None - No reportable interests on any s	chedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	STATE ZIP CODE
3970 Rocklin Rd	Rocklin	CA 95677-2720
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS	
I have used all reasonable diligence in preparing this st herein and in any attached schedules is true and comp		the best of my knowledge the information contained
I certify under penalty of perjury under the laws of	the State of California that the foregoing is t	true and correct.
Date Signed01/16/2017 02:49 PM	Signature	Electronic Submission
(month, day, year)		originally signed statement with your filing official.)

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION			
Name			
	Kenneth Broadway		

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
United Parcel Service	AT&T
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Transportation Company	Communications Company
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
▼ \$100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
(Describe) Partnership (Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	□ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	, , 16, , 16
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Zions Bancorporation	P NAME OF BOOMEOU ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial Institution	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	, , 16 , , 16
ACQUIRED DISPOSED	
NOTE DISTORED	
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 16 , , 16	, , 16 , , 16
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION			
Name			
Kenneth Broadway			

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
United Parcel Service	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transportation Company	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Corporate Pricing Manager	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
\$10,001 - \$100,000 X OVER \$100,000	S10,001 - \$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.)
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)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	Ю
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	_
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	
	City
\$1,001 - \$10,000	
	Guarantor
S10,001 - \$100,000	Guarantor
S10,001 - \$100,000 OVER \$100,000	☐ Other

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Det S	AUG 0 5 2016

Please type or print in	ink.		■ *** *** *** ** ** ** ** ** ** ** ** **	By CU
NAME OF FILER (LAST)		(FIRST)		(MIDDLE)
Broadway		Kenneth		Alan
1. Office, Agency		TOOL TO HE STORE COMMON TO REAL PROPERTY.		
Agency Name (Do City of Rocklin				
Division, Board, Dep	partment, District, if applicable		Your Position	
City Council			Councilmember Candidate	9
▶ If filing for multip	ele positions, list below or on an attach	ment. (Do not use	acronyms)	
Agency:			Position:	
2. Jurisdiction o	f Office (Check at least one box)			
State			☐ Judge or Court Commissioner (5	Statewide Jurisdiction)
Multi-County			County of	<u> </u>
City of Rocklin	n		Other	
3. Type of State	ment (Check at least one box)			
	period covered is January 1, 2015, thromber 31, 2015.	ough	Leaving Office: Date Left (Check one)	
The p	period covered is/	, through	 The period covered is Janual leaving office. 	ary 1, 2015, through the date of
Assuming Office	ce: Date assumed//	commontant (nm C+60 apres		, through
Candidate: Ele	ection year an	d office sought, if d	lifferent than Part 1:	
4. Schedule Sun	nmary (must complete)	of pages including this cover p	age: ³	
Schedules at	ttached			
Schedule A	-1 - Investments - schedule attached		Schedule C - Income, Loans, & Busine	ss Positions - schedule attached
Schedule A	-2 - Investments - schedule attached		Schedule D - Income - Gifts - schedule	e attached
☐ Schedule B	- Real Property - schedule attached		Schedule E - Income - Gifts - Travel F	Payments - schedule attached
-or-				
☐ None - No	reportable interests on any scho	edule		
5. Verification				
MAILING ADDRESS (Business or Agency Add	STREET Inss Recommended - Public Document)	CITY	STATE	ZIP CODE
		Rocklin	CA	95765
DAYTIME TELEPHONE	NUMBER		E-MAIL ADDRESS	
	onable diligence in preparing this stater ttached schedules is true and complete		red this statement and to the best of my kinds is a public document.	nowledge the information contained
l certify under pen	alty of perjury under the laws of the	State of Californi	a that the foregoing is true and corre	et.
Date Signed	- 4 - / L (month, day, year)	Siç	gnature	ment with your filing official.)

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Broadway

>	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTITY
	United Parcel Service	1	AT&T Inc
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	Transporation Company		Communications Company
	FAIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000		\$2,000 - \$10,000 2 \$10,001 - \$100,000
	▼ \$100,001 - \$1,000,000		S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other(Describe)		Stock Other(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
	NAME OF BUSINESS ENTITY	>	NAME OF BUSINESS ENTITY
	Zions Bancorporation		CENTER II DESCRIPTION OF THE PHONESS
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	Financial Institution		
	FAIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000		\$2,000 - \$10,000 \$10,001 - \$100,000
	S100,001 - \$1,000,000 Over \$1,000,000		S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other (Describe)		Stock Other (Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
		١.	
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
>	NAME OF BUSINESS ENTITY	>	NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	SENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BOSINESS
	EAD MADIET VALUE		END MARKET VALUE
	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000		FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other		Stock Other
	(Describe) Partnership () Income Received of \$0 - \$499		(Describe) Partnership (Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)		○ Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
Co	omments:		

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	ACCOUNT.
Kenneth Broadway	STATISTICS AND ADDRESS.

1. INCOME RECEIVED	➤ 1, INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
United Parcel Service	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transporation Company	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Corporate Pricing Manager	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 VER \$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.)
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 (Describe)	Other (Describe)
(beside) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDEDO (D. June A. Liver & Marie Liver)	% None
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
BUGINESS ACTIVITY, IF ANY, OF LEADER	
Accounts Company Objects to Company of the Company	Real Property Street address
HIGHEST BALANCE DURING REPORTING PERIOD	
S500 - \$1,000	City
\$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	land.
OVER \$100,000	Other (Describe)
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Initial Filing Recoived

OF CONTROLLED

MAR 1 6 2016

(MIDDLE)

Please type or print in ink. NAME OF FILER (LAST) (FIRST) Broadway Kenneth 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Rocklin Division, Board, Department, District, if applicable Your Position Planning Commissioner ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: _ 2. Jurisdiction of Office (Check at least one box) State ☐ Judge or Court Commissioner (Statewide Jurisdiction) County of ____ City of Rocklin 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2015, through Leaving Office: Date Left ____/___/__ December 31, 2015. (Check one) -or-O The period covered is January 1, 2015, through the date of The period covered is _______ through leaving office. December 31, 2015. O The period covered is _ Assuming Office: Date assumed _____/____ the date of leaving office. Candidate: Election year ___ 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 E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - 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)** 3970 Rocklin Rd Rocklin CA 95677 DAYTIME TELEPHONE NUMBE E-MAIL ADDRESS ken.broadway@rocklin.ca.us 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 strue and correct. Date Signed ____03/16/2016 Signature _ (File the originally signed statement with your filing official.) (month, day, year)

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	700 MMISSION
Name	
Kenneth Broadway	

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
United Parcel Service	AT & T Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Transportation Company	Communications Company
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 ~ \$10,000 \$10,001 - \$100,000	☐ \$2,000 - \$10,000
✓ \$100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT ✓ Stock
Stock Chescribe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// 15// 15	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Zion Bancorporation	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial Institution	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
C means (tasks a c task at most propert an estimated by	C means reserved or veste at more properties of deficience of
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
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	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//	/ / 15 / / 15
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Broadway

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
United Parcel Service	Love of Learning Preschool
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
	200 r Borton St, ricommi, S. J.
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transportation Company	Preschool
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Corporate Pricing Manager	Owner
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
☐ \$10,001 - \$100,000	₹ \$10,001 - \$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.)
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.) Loan repayment	(Real property, car, boat, etc.) 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(Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	
\$1,001 - \$10,000	City
\[\\$10,001 - \\$100,000	Guarantor
OVER \$100,000	
	Other(Describe)
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTI

EC	ΕN	Date	hitial Filing
BY:	172		ceived al Use Only

PI	ease type or print in link.					
NA	ME OF FILER	(LAST)	·	(FIRST)		(MIDDLE)
В	roadway		Kenneth		A	lan
1.	Office, Agency, or (ourt				
	Agency Name (Do not use	acronyms)				
	City of Rocklin					
	Division, Board, Departmen	t, District, if applicable		Your Position		
				Planning Com	mission	
	▶ If filing for multiple posit	ions, list below or on an attach	ment. (Do not use	acronyms)		
	Agonovi			Position:		
	Agency.			. FOSITION.		
2.	Jurisdiction of Offic	Ce (Check at least one box)				· · · · · · · · · · · · · · · · · · ·
	State			☐ Judge or Court C	Commissioner (Sta	tewide Jurisdiction)
	Multi-County			County of		
	- Pocklin					
	E only of					
3.	Type of Statement	(Check at least one box)				
		overed is January 1, 2014, thro	ough		Date Left	J
	December 31		114	(Check one)		4 0044 Harrish Harrish
	The period co December 31	overed is 03 , 24 , 20 , 2014.	through	leaving office		1, 2014, through the date of
	Assuming Office: Date	te assumed/	white the same of	The period of the date of le		, through
	Candidate: Election ye	ear an	d office sought, if di	ifferent than Part 1:		
4.	Schedule Summary					
	Check applicable sch		► Total I	number of pages inc	cluding this c	over page: 3
	Schedule A-1 - Investm	nents – schedule attached	1	7 Schedule C - Income.	Loans, & Busines	s Positions - schedule attached
		nents - schedule attached		Schedule D - Income -		
	Schedule B - Real Pro	perty - schedule attached] Schedule E - Income -	- Gifts - Travel Pa	ayments - schedule attached
			-Oï-			
		None - No	o reportable interest	's on any schedule		
5.	Verification					
	MAILING ADDRESS (Business or Agency Address Recoi	STREET mmended - Public Document)	CITY		STATE	ZIP CODE
	3970 Rocklin Road	•	Rocklin		CA	95677
	DAYTIME TELEPHONE NUMBER		E	-MAIL ADDRESS		
		iligence in preparing this statent schedules is true and complete			ie pest of my know	wledge the information contained
	I certify under penalty of p	erjury under the laws of the	State of California	that the foregoing is tr	He and correct.	
	Date Signed 03/16/2015		67	m = 6 · · · · ·		
	Date Signed	(month, day, year)	Sigi	nature(File the o	originally signed statement	t with your filing official.)

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Alan Broadway

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
United Parcel Service	AT&T Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Transportation Company	Communications Co
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	2 \$2,000 - \$10,000 2 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	▶ NAME OF BUSINESS ENTITY
Zions Bancorporation	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial Institution	
FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
✓ Stock Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 14 // 14	/ / 14 / / 14
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	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe) Partnership () Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	//_14//14
ACQUIRED DISPOSED	ACQUIRED DISPOSED
,	•
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Andrew Comment	Date Received
	L - 3 ZOM 🕻

Please type or print in ink.						e e
NAME OF FILER	(LAST)		(FIRST)		BY: (MIDD	LE)
Broadway		Kenneth			Alan	
1. Office, Agency, or Co	ourt	ş				=
Agency Name (Do not use a	acronyms)					
City of Rocklin						
Division, Board, Department,	District, if applicable		Your Position			
			Planning Con	nmissioner		
▶ If filing for multiple position	ns, list below or on an attachr	ment. (Do not use	acronyms)			
Agency:			Position:			
2. Jurisdiction of Office	e (Check at least one box)					
☐ State			☐ Judge or Court	Commissioner (St	atewide Jurisdiction	n)
Multi-County			County of			
City of Rocklin			Other			
E ON O						
3. Type of Statement (C	heck at least one box)					
December 31, 2	ered is January 1, 2013, throu 2013.	ugh	Leaving Office (Check one)	: Date Left		
-or- The period cove December 31, 2	ered is/ 2013.	, through	The period of leaving office		ry 1, 2013, through	the date of
Assuming Office: Date	assumed	2014		covered is leaving office.	<i></i>	, through
Candidate: Election year	r and	d office sought, if di	fferent than Part 1:		And the state of t	
4. Schedule Summary		***************************************				
Check applicable schedules	or "None."	► Total r	number of pages in	ncluding this	cover page: $\frac{3}{}$	
✓ Schedule A-1 - Investme	nts - schedule attached	1.7	Schedule C - Income			
Schedule A-2 - Investme			Schedule D - Income			00000 0000000
Schedule B - Real Prope	erty - schedule attached		Schedule E - Income	– Gifts – Travel I	Payments – schedu	ule attached
		-or-				
	None - No	reportable interest	s on any schedule			
5. Verification						
MAILING ADDRESS S	TREET	CITY		STATE	ZIP CODE	
(Business or Agency Address Recomm	iended - Public Document)	Rocklin		CA	95765	
DAYTIME TELEPHONE NUMBER			-MAIL ADDRESS (OPTIONAL)			
I have used all reasonable dilig herein and in any attached scl				the best of my kno	wledge the information	ation contained
I certify under penalty of per	rjury under the laws of the	State of California	that the foregoing is t	true and correct.		
Date Signed 07/03/2014		Siar	nature			
_	nonth, day, year)	3-		originally signed stateme	ent with your filing official.)	

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Alan Broadway

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
United Parcel Service	AT&T Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Transportation Company	Communications Company
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
☑ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock ☐ Other(Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Zions Bankcorporation	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Financial Institution	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$\sqrt{\$10,001} - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More (Report on Schedule C)
Theorie Necessal of Good of Motor (Nepoli of Suiteball Cy	Wilderto Necessary of Wild (Nepolt an Scripbille C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 13 / / 13	// 13// 13
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	NAIVE OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
1	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Commente	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Kenneth Alan Broadway

➤ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
United Parcel Service	Love of Learning Preschool
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transportation Company	Preschool
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Corporate Pricing Manager	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 VER \$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	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of	Sale of(Real property, car, boat, etc.)
(Real property, car, boat, etc.)	
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other	☐ Other
(Describe)	(Describe)
1	l
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	
	nding institutions, or any indebtedness created as part of a
	lender's regular course of business on terms available to tus. 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
A STATE OF LEGISLATION AND A STATE OF THE ST	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
L. 372., \$100,000	Other(Describe)
Comments	
Comments:	