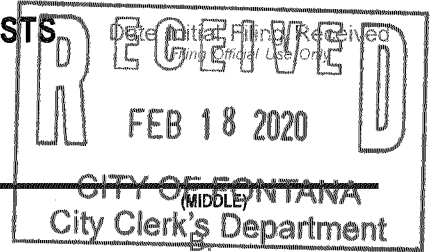


STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A PUBLIC DOCUMENT



Please type or print in ink.

NAME OF FILER (LAST) Roberts (FIRST) John

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Fontana

Council Member

Division, Board, Department, District, if applicable

Your Position

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

Agency: Omnitrans

Position: Board Member

San Bernardino County Transportation Authority & Alternate Board Member

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 Fontana

Other _____

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

Annual: The period covered is January 1, 2019, through December 31, 2019.

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

-or-

The period covered is _____, through December 31, 2019.

The period covered is January 1, 2019, through the date of leaving office.

-or-

Assuming Office: Date assumed _____

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

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

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

Schedules attached

Schedule A-1 - Investments – schedule attached

Schedule C - Income, Loans, & Business Positions – schedule attached

Schedule A-2 - Investments – schedule attached

Schedule D - Income – Gifts – schedule attached

Schedule B - Real Property – schedule attached

Schedule E - Income – Gifts – Travel Payments – schedule attached

-or- **None - No reportable interests on any schedule**

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE

(Business or Agency Address Recommended - Public Document)

8353 Sierra Avenue Fontana, CA 92335

DAYTIME TELEPHONE NUMBER

(909) 350-7606

EMAIL ADDRESS

jrberts@fontana.org

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

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

Date Signed

2-18-2020
(month, day, year)

Signature

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