CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Hiber	John	E

1. Office, Agency, or Court

Agency Name: State Controller's Office

Division, Board, Department, District, if applicable: Executive Office

Your Position: Chief Operating Officer

► If filing for multiple positions, list below or on an attachment.

Agency: See attached

Position:

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

- [x] State
- [ ] Multi-County
- [ ] City of
- [ ] Judge (Statewide Jurisdiction)
- [ ] County of
- [ ] Other

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

- [x] **Annual:** The period covered is January 1, 2010, through December 31, 2010.

  -or-

  The period covered is ___/___/___, through December 31, 2010.

- [ ] **Assuming Office:** Date ___/___/___
- [ ] **Candidate:** Election Year _____ Office sought, if different than Part 1:
- [ ] **Leaving Office:** Date Left ___/___/___ *(Check one)*
  - ○ The period covered is January 1, 2010, through the date of leaving office.
  - ○ The period covered is ___/___/___, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

► **Total number of pages including this cover page:** 3

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

-or-

- [ ] **None** - *No reportable interests on any schedule*

5. Verification

MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	STATE	ZIP CODE
300 Capitol Mall, Suite 1850	Sacramento	CA	95814

DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS
(916) 552-8080	jhiber@sco.ca.gov

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 March 1, 2011 *(month, day, year)*

Signature [redacted] *(Sign in ink with your filing official.)*

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: John E. Hiber

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Mary K Hiber Revocable Trust

ADDRESS *(Business Address Acceptable)*
[redacted]

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Trust

YOUR BUSINESS POSITION
Trustee

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
- ☐ Loan repayment
- ☐ Partnership
- ☐ Sale of _____ *(Property, car, boat, etc.)*
- ☐ Commission or
- ☐ Rental Income, *list each source of $10,000 or more*
- ☒ Other Trustee Fees *(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
- ☐ $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
- ☐ Loan repayment
- ☐ Partnership
- ☐ Sale of _____ *(Property, car, boat, etc.)*
- ☐ Commission or
- ☐ Rental Income, *list each source of $10,000 or more*
- ☐ Other _____ *(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: _____

California Form 700

Statement of Economic Interests

Attachment I

John E. Hiber

1. California Public Employees' Retirement System
2. California Teachers' Retirement System
3. California Educational Facilities Authority
4. California Health Facilities Financing Authority
5. California State Public Works Board
6. Pooled Money Investment Board
7. General Obligation Bond Finance Committees