

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Please type or print in ink.

A PUBLIC DOCUMENT

Redlands City Clerk

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
LaBonte	Zachary	James	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
City of Redlands			
Division, Board, Department, District, if applicable	е	Your Position	
Quality of Life	Quality of Life Field Services Supervisor		
▶ If filling for multiple positions, list below or on	an attachment. (Do not use a	acronyms)	
Agency: Successor Agency to the Rec	development Agency	Position: FED SE	evices suferific
2. Jurisdiction of Office (Check at least	one box)		
☐ State		☐ Judge or Court Commissioner (S	tatewide Jurisdiction)
Multi-County		County of	
⊠ City of Redlands		Other	
es only of			
3. Type of Statement (Check at least one	box)		
Annual: The period covered is January 1, 2018, through December 31, 2018.  Leaving Office: Date Left/			
The period covered is/ December 31, 2018.	, through	<ul> <li>The period covered is Janua</li> <li>-or- leaving office.</li> </ul>	ry 1, 2018, through the date of
Assuming Office: Date assumed/_	<del></del>		
Candidate: Date of Election	and office sought, if		
4. Schedule Summary (must comple Schedules attached	te) ► Total number of	f pages including this cover pa	ge:
<ul> <li>☐ Schedule A-1 - Investments - schedule</li> <li>☐ Schedule A-2 - Investments - schedule</li> </ul>			
Schedule B - Real Property – schedule	- OBSERVED CONFESSION OF STATE		
Solicatio D = Notin Property = Solicatio	attaorieu	ochedule E = Income - Gills - Traver Pa	ayments – schedule attached
-or-   None - No reportable interests	on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY ent)	STATE	ZIP CODE
po box 3005 Cajon St	Redlands	CA	92373
( 909 ) 7987655	į.	MAIL ADDRESS labonte@cityofredlands.org	
I have used all reasonable diligence in preparing herein and in any attached schedules is true and	this statement. I have reviewe	d this statement and to the best of my kr	nowledge the information contained
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
Date Signed 03/19/2019		With	
Date Signed (month, day, year) Signature (File the originally signed paper statement with your filing official.)			tement with your filing official )