

**AMENDMENT**

**COVER PAGE**

Filed Date: 08/21/2020 05:57 PM  
SAN: FPPC

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
**Brooks** **Latisa**

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)

**City of Foster City**

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 \_\_\_\_\_
- ☒ City of **Foster City** ☐ Other \_\_\_\_\_

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

- ☐ **Annual:** The period covered is January 1, 2019, through December 31, 2019.
- or-**
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2019.
- ☐ **Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- ☒ **Candidate:** Date of Election **11/03/2020** and office sought, if different than Part 1: \_\_\_\_\_
- ☐ **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one circle.)
- ☐ The period covered is January 1, 2019, through the date of leaving office.
- or-**
- ☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

**4. Schedule Summary (must complete) ► Total number of pages including this cover page: 2**

**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)

**610 Foster City Blvd** **Foster City** **CA** **94404-2222**

DAYTIME TELEPHONE NUMBER E-MAIL 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 **08/21/2020 05:57 PM** Signature **Electronic Submission**  
(month, day, year) (File the 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)

**► 1. BUSINESS ENTITY OR TRUST**

Piccadilly Catering

Name

Foster City, 94404

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

Catering and Event Solutions

**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:**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED                      DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership    ☒ Sole Proprietorship    ☐ \_\_\_\_\_ Other

YOUR BUSINESS POSITION Owner/General Manager

**► 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:**

\_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED                      DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_ Yrs. remaining    ☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

**Comments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Filer's Verification**

Print Name Latisa Brooks

Office, Agency or Court City of Foster City

Statement Type    ☐ 2019/2020 Annual    ☐ \_\_\_\_\_ Annual    ☐ Assuming    ☐ Leaving    ☒ Candidate  
(yr)

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

Date Signed 08/21/2020 05:57 PM  
(month, day, year)

Filer's Signature Electronic Submission