01/27/2025 05:27 PM

(month, day, year)

Date Signed _

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received Filing Official Use Only

COVER PAGE

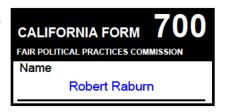
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SAN: FPPC Please type or print in ink. NAME OF FILER (LAST) (FIRST) (MIDDLE) Raburn Robert 1. Office, Agency, or Court Agency Name (Do not use acronyms) San Francisco Bay Area Rapid Transit District Division, Board, Department, District, if applicable Your Position **Board Member** ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) SEE ATTACHED LIST 2. Jurisdiction of Office (Check at least one box) Judge, Retired Judge, Pro Tem Judge, or Court Commissioner State (Statewide Jurisdiction) County of ___ City of _ 3. Type of Statement (Check at least one box) **X** Annual: The period covered is January 1, 2024, through Leaving Office: Date Left ____/_ December 31, 2024. (Check one circle below.) -or-The period covered is January 1, 2024, through the date of The period covered is ____/___/__ leaving office. December 31, 2024. -or-Assuming Office: Date assumed ____/___/__ _______ The period covered is ___ the date of leaving office. Candidate: Date of Election _______and office sought, if different than Part 1: _ 4. Schedule Summary (required) ► 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) 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.

Signature _

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

STATEMENT OF ECONOMIC INTERESTS COVER PAGE ATTACHMENT



EXPANDED STATEMENT LIST

3	Division, Board, Department, District	Position or Title		Type of Statement	Period Covered
Capitol Corridor Joint Powers Authority		Board Member	SEE BELOW	Annual	01/01/24 - 12/31/24

DESCRIPTION OF JURISDICTION

Agency: Capitol Corridor Joint Powers Authority

Jurisdiction Type: Multi-county

Description: Multi-county San Francisco, Alameda, Contra Costa, Placer, Sacramento, Santa Clara, Solano,

Yolo

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

(Ownership Interest is 10% or Greater)

► 1. BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
Robert and Patricia Raburn 2023 Family Trust	LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
Name 2150 Webster Street	☐ INVESTMENT ☐ REAL PROPERTY 10-778-15
Address (Business Address Acceptable)	Name of Business Entity, if Investment, or
Check one	Assessor's Parcel Number or Street Address of Real Property
▼ Trust, go to 2 □ Business Entity, complete the box, ther	Oakland CA 94612
GENERAL DESCRIPTION OF THIS BUSINESS	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISP \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other YOUR BUSINESS POSITION	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership Leasehold Other
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	Vinin —
■ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	E OF
None or X Names listed below	
2 units frm rental property (Gort/Kennedy)	Comments:
Filer's Verification	
Print Name Robert Raburn	
Office, Agency or Court San Francisco Bay Area Rap	oid Transit District
Statement Type × 2024/2025 Annual	al Assuming Leaving Candidate
I have used all reasonable diligence in preparing this statement. contained herein and in any attached schedules is true and co	. I have reviewed this statement and to the best of my knowledge the information omplete.
I certify under penalty of perjury under the laws of the S	state of California that the foregoing is true and correct.
Date Signed 01/27/2025 05:27 PM	Filer's SignatureRobert Raburn
(month, day, year)	