CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
JACOBS	LYNN	L.	[redacted]

MAILING ADDRESS (May use business address) STREET	CITY	STATE	ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS
[redacted]				

1. Office, Agency, or Court

Name of Office, Agency, or Court:

CALIFORNIA HOUSING FINANCE AGENCY

Division, Board, District, if applicable:

CALHFA BOARD OF DIRECTORS

Your Position:

BOARD MEMBER

➡ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: DEPT OF HOUSING + COMMUNITY DEVELOPMENT

Position: DIRECTOR

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

- ☒ State
- ☐ County of _____
- ☐ City of _____
- ☐ Multi-County _____
- ☐ Other _____

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

☐ Assuming Office/Initial Date: ___/___/___

☒ Annual: The period covered is January 1, 2007, through December 31, 2007.

-or-

○ The period covered is ___/___/___, through December 31, 2007.

☐ Leaving Office Date Left: ___/___/___ (Check one)

○ The period covered is January 1, 2007, through the date of leaving office.

-or-

○ The period covered is ___/___/___, through the date of leaving office.

☐ Candidate

4. Schedule Summary

➡ **Total number of pages including this cover page:** _____

➡ **Check applicable schedules or "No reportable interests."**

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☑ Yes – schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☑ Yes – schedule attached
Investments (10% or greater Ownership)

Schedule B ☐ Yes – schedule attached
Real Property

Schedule C ☑ Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☑ Yes – schedule attached
Income – Gifts

Schedule E ☐ Yes – schedule attached
Income – Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

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 MARCH 19, 2008

Signatu[redacted]ial.)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: LYNN JACOBS

SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

➤ NAME OF BUSINESS ENTITY: VERIZON COMMUNICATIONS

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: PHONE SERVICE

FAIR MARKET VALUE
- [x] $2,000 - $10,000
- [ ] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

NATURE OF INVESTMENT
- [x] Stock
- [ ] Other _____ (Describe)

IF APPLICABLE, LIST DATE:

___/___/07 ACQUIRED ___/___/07 DISPOSED

➤ NAME OF BUSINESS ENTITY: AT&T, INC.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: PHONE SERVICE

FAIR MARKET VALUE
- [ ] $2,000 - $10,000
- [x] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

NATURE OF INVESTMENT
- [x] Stock
- [ ] Other _____ (Describe)

IF APPLICABLE, LIST DATE:

___/___/07 ACQUIRED ___/___/07 DISPOSED

➤ NAME OF BUSINESS ENTITY: HARTFORD FINANCIAL

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: HARTFORD/ INSURANCE

FAIR MARKET VALUE
- [x] $2,000 - $10,000
- [ ] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

NATURE OF INVESTMENT
- [x] Stock
- [ ] Other _____ (Describe)

IF APPLICABLE, LIST DATE:

___/___/07 ACQUIRED ___/___/07 DISPOSED

➤ NAME OF BUSINESS ENTITY: ITT CORPORATION

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: TECHNOLOGY, HOTELS

FAIR MARKET VALUE
- [ ] $2,000 - $10,000
- [x] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

NATURE OF INVESTMENT
- [x] Stock
- [ ] Other _____ (Describe)

IF APPLICABLE, LIST DATE:

___/___/07 ACQUIRED ___/___/07 DISPOSED

➤ NAME OF BUSINESS ENTITY: BELL SOUTH

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: PHONE SALES & SERVICE

FAIR MARKET VALUE
- [x] $2,000 - $10,000
- [ ] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

NATURE OF INVESTMENT
- [x] Stock
- [ ] Other _____ (Describe)

IF APPLICABLE, LIST DATE:

N/A /07 ACQUIRED 12/15/07 DISPOSED

➤ NAME OF BUSINESS ENTITY: _____

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: _____

FAIR MARKET VALUE
- [ ] $2,000 - $10,000
- [ ] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

NATURE OF INVESTMENT
- [ ] Stock
- [ ] Other _____ (Describe)

IF APPLICABLE, LIST DATE:

___/___/07 ACQUIRED ___/___/07 DISPOSED

Comments: _____

SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: LYNN JACOBS

---

1. BUSINESS ENTITY OR TRUST

Name: AFFORDABLE COMMUNITIES, INC.

Address: 7937 CALAVERAS ST, VENTURA CA 93004

Check one
☐ Trust, *go to 2* ☐ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: AFFORDABLE HOUSING DEVT.

FAIR MARKET VALUE
☑ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/07 ACQUIRED ___/___/07 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☑ S. CORPORATION Other

YOUR BUSINESS POSITION: PRESIDENT

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☑ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number 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:
___/___/07 ACQUIRED ___/___/07 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

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1. BUSINESS ENTITY OR TRUST

Name: VENTURA AFFORDABLE HOMES, INC.

Address: 7937 CALAVERAS ST, VENTURA CA 93004

Check one
☐ Trust, *go to 2* ☑ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: AFFORDABLE HOUSING

FAIR MARKET VALUE
☑ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/07 ACQUIRED ___/___/07 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☑ S CORPORATION Other

YOUR BUSINESS POSITION: PRESIDENT

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☑ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number 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:
___/___/07 ACQUIRED ___/___/07 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

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Comments: _____

SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name: LYNN JACOBS

1. BUSINESS ENTITY OR TRUST

39 N. CALIFORNIA ST.
Name

39 N. CALIFORNIA ST., VENTURA CA 93001
Address

Check one
☑ Trust, *go to 2* ☐ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/07 ACQUIRED ___/___/07 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☐ _____ Other

YOUR BUSINESS POSITION _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☑ REAL PROPERTY

39 NORTH CALIFORNIA ST.
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property

VENTURA, CA 93001
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:
___/___/07 ACQUIRED ___/___/07 DISPOSED

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold _____ Yrs. remaining ☒ Other TRUST SHARES

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

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1. BUSINESS ENTITY OR TRUST

Name

Address

Check one
☐ Trust, *go to 2* ☐ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/07 ACQUIRED ___/___/07 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☐ _____ Other

YOUR BUSINESS POSITION _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or Street Address or Assessor's Parcel Number 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:
___/___/07 ACQUIRED ___/___/07 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: _____

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
STATE OF CALIFORNIA DEPT OF HOUSING + COMMUNITY DEVELOPMENT

ADDRESS
1800 3rd ST, SACRAMENTO, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
STATE GOVERNMENT

YOUR BUSINESS POSITION
DIRECTOR

GROSS INCOME RECEIVED
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [x] OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- [x] Salary
- [ ] Spouse's or registered domestic partner's income
- [ ] Loan repayment
- [ ] Sale of _____ *(Property, car, boat, etc.)*
- [ ] Commission or
- [ ] Rental Income, *list each source of $10,000 or more*
- [ ] Other _____ *(Describe)*

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS

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
- [ ] Sale of _____ *(Property, car, boat, etc.)*
- [ ] Commission or
- [ ] Rental Income, *list each source of $10,000 or more*
- [ ] Other _____ *(Describe)*

2. LOAN RECEIVED

* 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 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
FAIR POLITICAL PRACTICES COMMISSION

Name: LYNN JACOBS

SCHEDULE D
Income – Gifts

NAME OF SOURCE: CALIF BUILDING INDUSTRY ASSN.
ADDRESS: 1215 K ST. SACRAMENTO
BUSINESS ACTIVITY, IF ANY, OF SOURCE: LOBBYIST

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/17/07	$ 49.73	RECEPTION
/ /	$	
/ /	$	

NAME OF SOURCE: AMERICAN FOREST & PAPER ASSN.
ADDRESS: C/O CALIF FORESTRY ASSN
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3/21/07	$ 19.46	RECEPTION
/ /	$	
/ /	$	

NAME OF SOURCE: CALIFORNIA FORESTRY ASSN
ADDRESS: 1215 K ST, SACRAMENTO
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3/21/07	$ 19.47	Reception
/ /	$	
/ /	$	

NAME OF SOURCE: CALIF CHAMBER OF COMMERCE
ADDRESS: P.O. BOX 1736, SACRAMENTO
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/16/07	$ 26.41	Reception
/ /	$	
/ /	$	

NAME OF SOURCE: LUMBER ASSN OF CA. & NEVADA
ADDRESS: C/O CALIF FORESTRY ASSN
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3/21/07	$ 19.47	Reception
/ /	$	
/ /	$	

NAME OF SOURCE: CALIF BUSINESS ROUNDTABLE
ADDRESS: 1215 K ST #1570 SACRAMENTO
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/16/07	$ 19.92	RECEPTION
/ /	$	
/ /	$	

Comments: