CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERE **COVER PAGE**

A PUBLIC DOCUMENT

AUG 07 2024

Please type or print in ink. ME OF FILER (LAST) (FIRST) ERIC STEINLE 1. Office, Agency, or Court Agency Name (Do not use acronyms) CITY OF LOS ALTOX Division, Board, Department, District, if applicable Your Position CANDIDATE FOR MENBEL CITY COUNCIL ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: __ 2. Jurisdiction of Office (Check at least one box) Judge, Retired Judge, Pro Tem Judge, or Court Commissioner ☐ State (Statewide Jurisdiction) County of Lity of LOS ALTOS 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2019, through (Check one circle.) December 31, 2019. O The period covered is January 1, 2019, through the date of The period covered is _______, through leaving office. December 31, 2019. O The period covered is _______ through Assuming Office: Date assumed _______ the date of leaving office. Candidate: Date of Election 11/5 2024 and office sought, if different than Part 1:_____ 4. Schedule Summary (must complete) ► Total number of pages including this cover page: Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached **-Or-** None - No reportable interests on any schedule 5. Verification MAILING ADDRESS ZIP CODE CITY STREET (Business or Agency Address Recommended - Public Document) CA 4388 EL CAMINO REAL UNIT 249 LOS ALTOS EMAIL ADDRESS DAYTIME TELEPHONE NUMBER ERIC. STEINLE e ME. COM (510) 928-0276 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

(month, day, year)

Date Signed

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

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Eric Steinle

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
BIO-TECHNE	FRANKLIN RESOURCES, INC.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
BIOTECHNOLOGY	FINANCIAL
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock ☐ Other	Steels Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	
	NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	MOELIS & CO.
CNA FINANCIAL CORP	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	
INSURANCE	FINANCIAL
FAIR MARKET VALUE	FAIR MARKET VALUE
× \$2,000 - \$10,000 	X \$2,000 - \$10,000 S10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
15 150 150 150 150 DATE	IF ADDITIONAL ELLIST DATE:
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
EQUIFAX. INC.	PEOPLES BANCORP, INC.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FINANCIAL	FINANCIAL
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	× \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	X Stock Other(Describe)
Partnership () Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 23 , , , 23	, , 23 , , 23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
ACCOUNTED STOT COLLS	11
)	
Comments:	

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

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Name

Eric Steinle

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
UNITED STATES OIL	WARRIOR MET COAL, INC.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
ENERGY	MATERIALS
FAIR MARKET VALUE	FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
	\$1,000,001 - \$1,000,000 Over \$1,000,000
S100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	X Stock Other (Describe)
(/	\ <u> </u>
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
O masing (1000) as \$400 or many property or 5	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
STARBUCKS CORPORATION	GEN DIGITAL, INCL
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
HOCDITALITY	SOFTWARE
HOSPITALITY	SOFTWARE
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	× \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	X Stock Other(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , , 23	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
HAVEDTV	MAGNOLIA OIL & GAS
HAVERTY	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
SPECIALTY RETAIL	ENERGY
FAIR MARKET VALUE	FAIR MARKET VALUE
□ \$10,000 □ \$10,000	× \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$1,000,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	X Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More (Report on Schedule C)
	US ADDI IOADI S. LIOT DATE
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
)	

Comments: __

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Eric Steinle

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS CITY FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
II —
II —
\$10,001 - \$100,000
NATURE OF INTEREST
Ownership/Deed of Trust Easement
Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None
without regard to your official status. Personal loans and ness must be disclosed as follows:
NAME OF LENDER*
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)
%
HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \text{\$1,001 - \$10,000}
S10,001 - \$100,000 OVER \$100,000
S10,001 - \$100,000 OVER \$100,000 Guarantor, if applicable