

6. **Salary and Wages.**

List each employer that pays you or a member of your immediate family salary or wages in excess of \$5,000 annually. (Exclude state or local government or advisory agencies.) If no reportable salary or wages, check here

F Jay Pepper MD - self-employed psychiatrist

7. **Business Interests.**

Do you or a member of your immediate family, separately or together, operate your own business, or own or control an interest in excess of \$5,000 in a business?

YES NO

If yes, complete Schedule F

8. **Payments for Representation and Other Services.**

8A. Did you represent, excluding activity defined as lobbying in § 2.2-419, any businesses before any state governmental agencies, excluding courts or judges, for which you received total compensation during the past six months in excess of \$1,000, excluding compensation for other services to such businesses and representation consisting solely of the filing of mandatory papers and subsequent representation regarding the mandatory papers? (Officers and employees of local governmental and advisory agencies do NOT need to answer this question or complete Schedule G-1.)

YES NO

If yes, complete Schedule G-1

8B. Subject to the same exceptions as in 8A, did persons with whom you have a close financial association (partners, associates or others) represent, excluding activity defined as lobbying in § 2.2-419, any businesses before any state governmental agency for which total compensation was received during the past six months in excess of \$1,000? (Officers and employees of local governmental and advisory agencies do NOT need to answer this question or complete Schedule G-2.)

YES NO

If yes, complete Schedule G-2

8C. Did you or persons with whom you have a close financial association furnish services to businesses operating in Virginia pursuant to an agreement between you and such businesses, or between persons with whom you have a close financial association and such businesses for which total compensation in excess of \$1,000 was received during the past six months? Services reported under this provision shall not include services involving the representation of businesses that are reported under item 8A or 8B.

YES NO

If yes, complete Schedule G-3

9. **Real Estate.**

9A. **State Officers and Employees.**

Do you or a member of your immediate family hold an interest, including a partnership interest, valued at more than \$5,000 or more in real property (other than your principal residence) for which you have not already listed the full address on Schedule F? Account for real estate held in trust.

YES NO

If yes, complete Schedule H-1

9B. **Local Officers and Employees.**

Do you or a member of your immediate family hold an interest, including a partnership interest, or option, easement, or land contract, valued at more than \$5,000 in real property (other than your principal residence) for which you have not already listed in the full address on Schedule F? Account for real estate held in trust.

YES NO

If yes, complete Schedule H-2

10. **Real Estate Contracts with Governmental Agencies**

Do you or a member of your immediate family hold an interest valued at more than \$5,000 in real estate, including a corporate, partnership, or trust interest, option, easement, or land contract, which real estate is the subject of a contract, whether pending or completed within the past six months, with a governmental agency? If the real estate contract provides for the leasing of the property to a governmental agency, do you or a member of your immediate family hold an interest in the real estate valued at more than \$1,000? Account for all such contracts whether or not your interest is reported in Schedule F, H-1, or H-2. This requirement to disclose an interest in a lease does not apply to an interest derived through an ownership interest in a business unless the ownership exceeds three percent of the total equity of the business.

YES NO

If yes, complete Schedule I

Statements of Economic Interests are open for public inspection.

AFFIRMATION BY ALL FILERS.

I swear or affirm that the foregoing information is full, true and correct to the best of my knowledge.

Redella S Del Pepper
Signature

6/15/16
Date

Statement of Economic Interests

SCHEDULE B

PERSONAL LIABILITIES

NAME: Rebelle S Del Pepper

OFFICE OR POSITION HELD OR SOUGHT: City Council

Report personal liability by checking each category. Report only debts in excess of \$5,000. Do not report debts to any government. Do not report loans secured by recorded liens on property at least equal in value to the loan. Report contingent liabilities below and indicate which debts are contingent.

1. My personal debts are as follows:

CHECK APPROPRIATE CATEGORIES:	CHECK ONE	
	\$5,001 TO \$50,000	MORE THAN \$50,000
Banks	<input type="checkbox"/>	<input type="checkbox"/>
Savings institutions	<input type="checkbox"/>	<input type="checkbox"/>
Other loan or finance companies <i>car loan</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Insurance companies	<input type="checkbox"/>	<input type="checkbox"/>
Stock, commodity or other brokerage companies	<input type="checkbox"/>	<input type="checkbox"/>
Other businesses: (State principal business activity for each creditor and its name.)		
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
Individual creditors: (State principal business or occupation for each creditor and its name.)		
_____	<input type="checkbox"/>	<input type="checkbox"/>

2. The personal debts of the members of my immediate family are as follows:

CHECK APPROPRIATE CATEGORIES:	CHECK ONE	
	\$5,001 TO \$50,000	MORE THAN \$50,000
Banks	<input type="checkbox"/>	<input type="checkbox"/>
Savings institutions	<input type="checkbox"/>	<input type="checkbox"/>
Other loan or finance companies	<input type="checkbox"/>	<input type="checkbox"/>
Insurance companies	<input type="checkbox"/>	<input type="checkbox"/>
Stock, commodity or other brokerage companies	<input type="checkbox"/>	<input type="checkbox"/>
Other businesses: (State principal business activity for each creditor and its name.)		
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
Individual creditors: (State principal business or occupation for each creditor and its name.)		
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

SCHEDULE C

SECURITIES

NAME: Redella S Del Pepper

OFFICE OR POSITION HELD OR SOUGHT: City Council

“SECURITIES” INCLUDES stocks, bonds, mutual funds, limited partnerships, and commodity futures contracts.

“SECURITIES” EXCLUDES certificates of deposit, money market funds, annuity contracts, and insurance policies.

Identify each business or Virginia governmental entity in which you or a member of your immediate family, directly or indirectly, separately or together, own securities valued in excess of \$5,000. Name each issuer and type of security individually.

Do not list U.S. Bonds or other government securities not issued by the Commonwealth of Virginia or its authorities, agencies, or local governments. Do not list organizations that do not do business in this Commonwealth, but most major businesses conduct business in Virginia. Account for securities held in trust.

If no reportable securities, check here ____.

NAME OF ISSUER	TYPE OF SECURITY (STOCKS, BONDS, MUTUAL FUNDS, ETC.)	CHECK ONE		
		5,001 to 50,000	50,001 to 250,000	More than 250,000
<u>McLaughlin Ryder Investments</u>	<u>Stocks/Mutual Funds</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Weiss - IRA (spouse)</u>	<u>Mutual Funds</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Weiss - Joint Account</u>	<u>Mutual Funds</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Pepper Investments LLC</u>	<u>Stocks</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Statement of Economic Interests

SCHEDULE F
BUSINESS INTERESTS

NAME: Redella S. Del Pepper

OFFICE OR POSITION HELD OR SOUGHT: _____

Complete this Schedule for each self-owned or family-owned business (including rental property, a farm, or consulting work), partnership, or corporation in which you or a member of your immediate family, separately or together, own an interest having a value in excess of \$5,000.

If the enterprise is owned or operated under a trade, partnership, or corporate name, list that name; otherwise, merely explain the nature of the enterprise. If rental property is owned or operated under a trade, partnership, or corporate name, list the name only; otherwise give the address of each property. Account for business interests held in trust.

NAME OF BUSINESS, CORPORATION, PARTNERSHIP, FARM; ADDRESS OF RENTAL PROPERTY	CITY OR COUNTY AND STATE	NATURE OF ENTERPRISE (FARMING, LAW, RENTAL PROPERTY, ETC.)	GROSS INCOME		
			50,000 or less	50,001 to 250,000	More than 250,000
<u>F. J. Pepper M.D. P.C.</u>	<u>Alex. VA</u>	<u>psychiatric practice in corporation</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

