CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

COVER PAGE

A PUBLIC DOCUMENT Please type or print in ink.

Please type or print in ink.	A PUBL	IC DOCUMENT	At A fi
NAME OF FILER (LAST)	(FIRST)		
- ITILL	ROY		FRANCIS
1. Office, Agency, or Court			I.E.Mac.P.
Agency Name (Do not use acronyms)			
CALIFORNIA HIGH	SPEED	RAIL	
Division, Board, Department, District, if applicable		Your Position	
DELIVERY			IEF OPERATING OFFICE
▶ If filing for multiple positions, list below or on an attach	ment. (Do not use a	cronyms)	
Agency:		Position:	
2 Jurisdiction of Office (chart at a			
2. Jurisdiction of Office (Check at least one box)			
∑ State		☐ Judge or Court Commissioner	(Statewide Jurisdiction)
Multi-County	224		<u>'</u>
City of			
3. Type of Statement (Check at least one box)			
Annual: The period covered is January 1, 2018, throu	ıah	Leaving Office: Date Left	
December 31, 2018.	-5		one circle.)
The period covered is/	, through	O The period covered is Jan	uary 1, 2018, through the date of
Assuming Office: Date assumed//		-or- leaving office.	
		the date of leaving office.	through
Candidate: Date of Election and	id office sought, if dif	ferent than Part 1;	
. Schedule Summary (must complete) > 70	otal number of r	12000 Including this saver	2
Schedules attached	oral transport of F	pages including this cover p	page:
Schedule A-1 - Investments - schedule attached	5301		
Schedule A-2 - Investments - schedule attached	[X] Sch	edule C - Income, Loans, & Busine	ess Positions – schedule attached
☐ Schedule B - Real Property - schedule attached ☐ Schedule D - Income - Gifts - schedule attached ☐ Schedule E - Income - Gifts - Travel Payments - schedule attached			
- San		euule c = income – Gifts – Travel F	Payments - schedule attached
Or- None - No reportable interests on any sch	nedule		
Verification	20 20 10 10 10 10 10 10 10 10 10 10 10 10 10		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	STATE	ZIP CODE
770 L ST SUITE 620	SACRAI		
DAYTIME TELEPHONE NUMBER		ADDRESS	95814
(916) 407 6967		ROY. HIM @ HSP	C.CA.GOV
I have used all reasonable diligence in preparing this statement herein and in any attached schedules is true and complete. I	. I have reviewed this acknowledge this is	s stotomont and to the hours of	nowledge the information contained
I certify under penalty of perjury under the laws of the Sta	ite of California that	the foregoing is true and correct	F 4
Date Signed 318 19		DEIT.	
(month, day, year)	Signatur	e (File the originally signed paper sta	lement with your Bling 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.

CALIFORI		FORM 700
Name		-
ROY	F	HILL

To the state of th	montola statements.
TACOSS ENGINEERING	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
CONSULTANCY	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,000 \$10,000 Over \$1,000,000	\$2,000 - \$10,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock Other
(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership (Income Received of \$0 - \$499 (Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	//18//18
ACQUIRED DISPOSED NAME OF BUSINESS ENTITY	ACQUIRED DISPOSED
MANUE OF BROINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000	\$2,000 - \$10,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O 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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	//_18//18
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	€
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Repart on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Roy Fltur

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
WSP USA INC	3
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
I PENN PUZA, 34TH ST, NY.	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	DIJONIESO ACTIVEDO JE ANDO DE OCUPOR
CONSULTANCY	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
SENIOR VICE PRESIDENT	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1 ,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
☐ \$10,001 - \$100,000 X OVER \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Colo of	[The Cole of
Sale of(Real property, car, boal, etc.)	Sale of(Reel property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, #st each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
	·
(Describe)	. (Describe)
Other	Other
(Describe)	(Describe)
a retail installment or credit card transaction, made in th	lending institution, or any indebtedness created as part of e lender's regular course of business on terms available to tus. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
40	W FT Name
ADDRESS (Business Address Acceptable)	
3	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
DOGINE CONTROL IN THE STATE OF LENDERS	
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	
	Au.
\$1,001 - \$10,000	City
_	City Guarantor
\$10,001 - \$100,000	****
_	Guarantor
\$10,001 - \$100,000	Guarantor
\$10,001 - \$100,000	Guarantor