

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

Date Received  
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**APR -1 2010**  
CalHFA - LEGAL

*A Public Document*

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Spears	L.	Steven	( 916 ) 324-4640	
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE
P.O. Box 4034		Sacramento	CA	95812-4034
OPTIONAL: E-MAIL ADDRESS				

**1. Office, Agency, or Court**

Name of Office, Agency, or Court:  
California Housing Finance Agency (CalHFA)  
Division, Board, District, if applicable:  
CalHFA Board of Directors  
Your Position:  
CalHFA Acting Executive Director/Board Member  
▶ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)  
State Treasurer's Office  
Agency: CDLAC, TCAC  
Position: Alternate Committee Member

**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, 2009, through December 31, 2009.  
**-or-**
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2009.
- Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
  - The period covered is January 1, 2009, through the date of leaving office.  
**-or-**
  - The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate Election Year: \_\_\_\_\_

**4. Schedule Summary**

- ▶ Total number of pages including this cover page: 1
- ▶ 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 - Gifts - 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 4/1/10  
*(month, day, year)*  
Signature [Signature]  
*(File the originally signed statement with your filing official.)*