

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
*A PUBLIC DOCUMENT*

Filed Date: 05/14/2024 12:25 AM  
SAN: FPPC

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Silver Adam

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

Agency Name (Do not use acronyms)  
Fair Political Practices Commission

Division, Board, Department, District, if applicable Your Position  
Chair

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

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

- State  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of \_\_\_\_\_
- City of \_\_\_\_\_  Other \_\_\_\_\_

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

- Annual:** The period covered is January 1, 2023, through December 31, 2023.  **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
(Check one circle.)
- or-** The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_\_, through December 31, 2023.  The period covered is January 1, 2023, through the date of leaving office.
- Assuming Office:** Date assumed 04 / 16 / 2024  **-or-** The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_\_, through the date of leaving office.
- Candidate:** Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary (required)**

► Total number of pages including this cover page: 5

**Schedules attached**

- Schedule A-1 - Investments** – schedule attached  **Schedule C - Income, Loans, & Business Positions** – schedule attached
- Schedule A-2 - Investments** – schedule attached  **Schedule D - Income – Gifts** – schedule attached
- Schedule B - Real Property** – schedule attached  **Schedule E - Income – Gifts – Travel Payments** – schedule attached

**-or-**  **None - No reportable interests on any schedule**

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
1102 Q Street, Suite 3050 Sacramento CA 95811

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 916 ) 324-3722

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.

Date Signed 05/14/2024 12:25 AM Signature Adam Silver  
(month, day, year) (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.

Name

Adam Silver

▶ NAME OF BUSINESS ENTITY  
Honeybook, Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Technology

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 Unvested stock options  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 ACQUIRED                                      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

Adam Silver

**▶ 1. BUSINESS ENTITY OR TRUST**

Two Roads Event Co.

Name

1179 Smoke River Way, Sacramento, CA 95831

Address (Business Address Acceptable)

Check one

Trust, go to 2     Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

Event production and design

<p>FAIR MARKET VALUE</p> <p><input type="checkbox"/> \$0 - \$1,999</p> <p><input type="checkbox"/> \$2,000 - \$10,000</p> <p><input checked="" type="checkbox"/> \$10,001 - \$100,000</p> <p><input type="checkbox"/> \$100,001 - \$1,000,000</p> <p><input type="checkbox"/> Over \$1,000,000</p>	<p>IF APPLICABLE, LIST DATE:</p> <p style="text-align: center;">____/____/____    ____/____/____</p> <p style="text-align: center;">ACQUIRED                  DISPOSED</p>
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NATURE OF INVESTMENT

Partnership     Sole Proprietorship     \_\_\_\_\_ 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                       \$10,001 - \$100,000

\$500 - \$1,000                 OVER \$100,000

\$1,001 - \$10,000

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

None    or     Names listed below

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

Check one box:

INVESTMENT                       REAL PROPERTY

---

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

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Description of Business Activity or City or Other Precise Location of Real Property

<p>FAIR MARKET VALUE</p> <p><input type="checkbox"/> \$2,000 - \$10,000</p> <p><input type="checkbox"/> \$10,001 - \$100,000</p> <p><input type="checkbox"/> \$100,001 - \$1,000,000</p> <p><input type="checkbox"/> Over \$1,000,000</p>	<p>IF APPLICABLE, LIST DATE:</p> <p style="text-align: center;">____/____/____    ____/____/____</p> <p style="text-align: center;">ACQUIRED                  DISPOSED</p>
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NATURE OF INTEREST

Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_     Other \_\_\_\_\_

Yrs. remaining

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

**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

Trust, go to 2     Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

<p>FAIR MARKET VALUE</p> <p><input type="checkbox"/> \$0 - \$1,999</p> <p><input type="checkbox"/> \$2,000 - \$10,000</p> <p><input type="checkbox"/> \$10,001 - \$100,000</p> <p><input type="checkbox"/> \$100,001 - \$1,000,000</p> <p><input type="checkbox"/> Over \$1,000,000</p>	<p>IF APPLICABLE, LIST DATE:</p> <p style="text-align: center;">____/____/____    ____/____/____</p> <p style="text-align: center;">ACQUIRED                  DISPOSED</p>
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NATURE OF INVESTMENT

Partnership     Sole Proprietorship     \_\_\_\_\_ 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                       \$10,001 - \$100,000

\$500 - \$1,000                 OVER \$100,000

\$1,001 - \$10,000

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

None    or     Names listed below

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

Check one box:

INVESTMENT                       REAL PROPERTY

---

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

---

Description of Business Activity or City or Other Precise Location of Real Property

<p>FAIR MARKET VALUE</p> <p><input type="checkbox"/> \$2,000 - \$10,000</p> <p><input type="checkbox"/> \$10,001 - \$100,000</p> <p><input type="checkbox"/> \$100,001 - \$1,000,000</p> <p><input type="checkbox"/> Over \$1,000,000</p>	<p>IF APPLICABLE, LIST DATE:</p> <p style="text-align: center;">____/____/____    ____/____/____</p> <p style="text-align: center;">ACQUIRED                  DISPOSED</p>
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NATURE OF INTEREST

Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_     Other \_\_\_\_\_

Yrs. remaining

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

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Name

Adam Silver

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
<p>NAME OF SOURCE OF INCOME <u>Honeybook, Inc.</u></p> <p>ADDRESS <i>(Business Address Acceptable)</i> <u>539 Bryant Street, Suite 200 San Francisco, CA 94107</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Technology</u></p> <p>YOUR BUSINESS POSITION <u>User Experience Designer</u></p> <p>GROSS INCOME RECEIVED    <input type="checkbox"/> No Income - Business Position Only</p> <p><input type="checkbox"/> \$500 - \$1,000                      <input type="checkbox"/> \$1,001 - \$10,000</p> <p><input checked="" type="checkbox"/> \$10,001 - \$100,000              <input type="checkbox"/> OVER \$100,000</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</p> <p><input type="checkbox"/> Salary    <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income <small>(For self-employed use Schedule A-2.)</small></p> <p><input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)</p> <p><input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small></p> <p><input type="checkbox"/> Loan repayment</p> <p><input type="checkbox"/> Commission or    <input type="checkbox"/> Rental Income, list each source of \$10,000 or more</p> <p>_____ (Describe)</p> <p><input type="checkbox"/> Other _____ <small>(Describe)</small></p>	<p>NAME OF SOURCE OF INCOME _____</p> <p>ADDRESS <i>(Business Address Acceptable)</i> _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE _____</p> <p>YOUR BUSINESS POSITION _____</p> <p>GROSS INCOME RECEIVED    <input type="checkbox"/> No Income - Business Position Only</p> <p><input type="checkbox"/> \$500 - \$1,000                      <input type="checkbox"/> \$1,001 - \$10,000</p> <p><input type="checkbox"/> \$10,001 - \$100,000              <input type="checkbox"/> OVER \$100,000</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</p> <p><input type="checkbox"/> Salary    <input type="checkbox"/> Spouse's or registered domestic partner's income <small>(For self-employed use Schedule A-2.)</small></p> <p><input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)</p> <p><input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small></p> <p><input type="checkbox"/> Loan repayment</p> <p><input type="checkbox"/> Commission or    <input type="checkbox"/> Rental Income, list each source of \$10,000 or more</p> <p>_____ (Describe)</p> <p><input type="checkbox"/> Other _____ <small>(Describe)</small></p>

**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from a commercial lending institution, 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:

<p>NAME OF LENDER* _____</p> <p>ADDRESS <i>(Business Address Acceptable)</i> _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF LENDER _____</p> <p>HIGHEST BALANCE DURING REPORTING PERIOD</p> <p><input type="checkbox"/> \$500 - \$1,000</p> <p><input type="checkbox"/> \$1,001 - \$10,000</p> <p><input type="checkbox"/> \$10,001 - \$100,000</p> <p><input type="checkbox"/> OVER \$100,000</p>	<p>INTEREST RATE                      TERM (Months/Years)</p> <p>_____ %    <input type="checkbox"/> None                      _____</p> <p>SECURITY FOR LOAN</p> <p><input type="checkbox"/> None                      <input type="checkbox"/> Personal residence</p> <p><input type="checkbox"/> Real Property _____ <small style="margin-left: 150px;">Street address</small></p> <p style="text-align: right; margin-left: 150px;">_____</p> <p style="text-align: right; margin-left: 150px;"><small>City</small></p> <p><input type="checkbox"/> Guarantor _____</p> <p><input type="checkbox"/> Other _____ <small style="margin-left: 150px;">(Describe)</small></p>
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**Comments:** \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
Adam Silver

▶ NAME OF SOURCE *(Not an Acronym)*  
Judy Yee  
 ADDRESS *(Business Address Acceptable)*  
5628 El Granero Way, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 11 / 24</u>	<u>\$ 50</u>	<u>Gift card</u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>

▶ NAME OF SOURCE *(Not an Acronym)*  
 ADDRESS *(Business Address Acceptable)*  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>

▶ NAME OF SOURCE *(Not an Acronym)*  
 ADDRESS *(Business Address Acceptable)*  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>

▶ NAME OF SOURCE *(Not an Acronym)*  
 ADDRESS *(Business Address Acceptable)*  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>

▶ NAME OF SOURCE *(Not an Acronym)*  
 ADDRESS *(Business Address Acceptable)*  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>

▶ NAME OF SOURCE *(Not an Acronym)*  
 ADDRESS *(Business Address Acceptable)*  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>
<u>    /    /    </u>	<u>\$</u>	<u>    </u>

Comments: \_\_\_\_\_