

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

STATEMENT OF ECONOMIC INTERESTS
 FAIR POLITICAL PRACTICES COMMISSION

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 Official Use Only

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11 NOV -7 PM 12:55

2011 NOV -2 PM 4:55

A Public Document

TP

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 CONDE OSVALDO

1. Office, Agency, or Court

Agency Name
 CUDAHY CITY COUNCIL COUNCILMEMBER
 Division, Board, Department, District, if applicable Your Position

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

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

State Judge (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of CUDAHY Other _____

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

Annual: The period covered is January 1, 2010, through December 31, 2010. Leaving Office: Date Left ____/____/____
 -or- (Check one)
 The period covered is ____/____/____, through December 31, 2010. The period covered is January 1, 2010, through the date of leaving office.
 Assuming Office: Date ____/____/____ The period covered is ____/____/____, through the date of leaving office.
 Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

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



I certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete.

Date Signed 11/02/2011
 (month, day, year)

Signature

COVER PAGE
 FAIR POLITICAL
 PRACTICES COMMISSION

2011 MAR 25 PM 4:44

Please type or print in ink.

NAME OF FILER (LAST) OSVALDO (FIRST) M (MIDDLE) CITY CLERK'S
 CONDE

1. Office, Agency, or Court

Agency Name CUDAHY CITY COUNCIL Your Position COUNCILMEMBER
 Division, Board, Department, District, if applicable

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

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

- State
- Multi-County _____
- City of CUDAHY
- Judge (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual:** The period covered is January 1, 2010, through December 31, 2010.
 -or-
 The period covered is _____, through December 31, 2010.
- Assuming Office:** Date _____
- Candidate:** Election Year _____ Office sought, if different than Part 1: _____
- Leaving Office:** Date Left _____ (Check one)
 - The period covered is January 1, 2010, through the date of leaving office.
 - The period covered is _____, through the date of leaving office.

4. Schedule Summary

- Check applicable schedules or "None." ► Total number of pages including this cover page: 2
- Schedule A-1 - Investments** – schedule attached
 - Schedule A-2 - Investments** – schedule attached
 - Schedule B - Real Property** – schedule attached
 - Schedule C - Income, Loans, & Business Positions** – schedule attached
 - Schedule D - Income – Gifts** – schedule attached
 - Schedule E - Income – Gifts – Travel Payments** – schedule attached
- or-
 None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS <i>(Business or Agency Address Recommended - Public Document)</i>	STREET	CITY	STATE	ZIP CODE
	<u>5220 SANTA ANA STREET</u>	<u>CUDAHY</u>	<u>CA</u>	<u>90201</u>
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS			
<u>(323) 773-5143</u>	<u>clerklarry101@aol.com</u>			

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 (d)(5)

Date Signed 3/25/11 (month, day, year) Signature _____ with your filing official.)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST

NOVO MUNDO

Name
4949 CLARA STREET

Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	<u> </u> / <u> </u> / <u>10</u>
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> CORPORATION	Other
YOUR BUSINESS POSITION <u>SHAREHOLDER</u>	

▶ 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.)

BUSINESS LOAN \$200,000 BANCO POPULAR

BUSINESS LOAN \$200,000 BANCO POPULAR

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

Check one box:
 INVESTMENT REAL PROPERTY

NOVO MUNDO

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

CUDAHY

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

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	<u> </u> / <u> </u> / <u>10</u>
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input checked="" type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold _____ <input type="checkbox"/> Other _____	Yrs. remaining
<input type="checkbox"/> 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 BUSINESS ACTIVITY	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	<u> </u> / <u> </u> / <u>10</u>
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> _____	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

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

Check one box:
 INVESTMENT REAL PROPERTY

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

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

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	<u> </u> / <u> </u> / <u>10</u>
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold _____ <input type="checkbox"/> Other _____	Yrs. remaining
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

Comments: _____

11 NOV -7 PM 12:55

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST

NOVO MUNDO
Name
4949 CLARA STREET
Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Grocery Market

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 10 DISPOSED / / 10

NATURE OF INVESTMENT
 Sole Proprietorship Partnership CORPORATION Other
 YOUR BUSINESS POSITION SHAREHOLDER

▶ 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.)

BUSINESS LOAN \$200,000 BANCO POPULAR
PROPERTY LOAN \$200,000 BANCO POPULAR

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

Check one box:
 INVESTMENT REAL PROPERTY
 4949 CLARA STREET
 Name of Business Entity or
 Street Address or Assessor's Parcel Number of Real Property

CITY OF CUDAHY
 Description of Business Activity or
 City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 10 DISPOSED / / 10

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: _____

Verification

Print Name OSVALDO CONDE

Office, Agency or Court CITY OF CUDAHY COUNCILMEMBER

Statement Type 2010/2011 Annual _____ Annual Assuming Leaving Candidate
(yr)

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 (d)(5) correct.

Date Signed 11/02/2011
(month, day, year)

Signature 