

**STATEMENT OF ECONOMIC INTERESTS**

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**COVER PAGE**  
POLITICAL PRACTICES COMMISSION

MAR 9 2011 AM 8:02

Please type or print in ink.

2011 MAR 11 PM 1:52

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
HANSEN THOMAS J.

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

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

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

Agency: PLEASE SEE ATTACHMENT. Position:

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

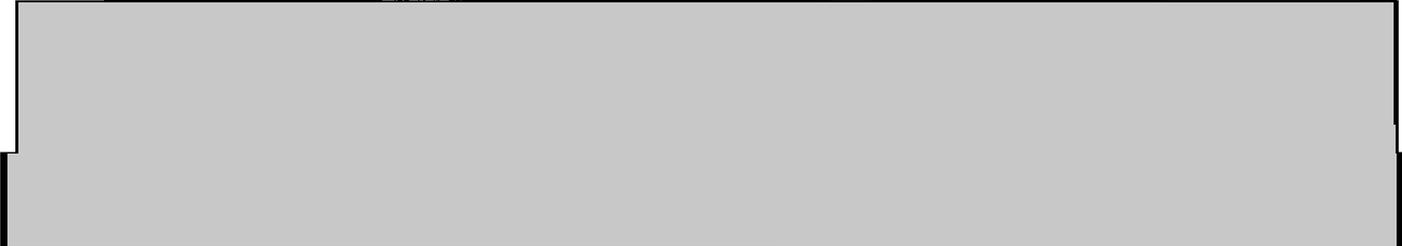
State  Judge (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of \_\_\_\_\_  
 City of PARAMOUNT  Other \_\_\_\_\_

**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: 5**  
 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



herein and in any attached schedules is true and complete. I acknowledge this is  
I certify under penalty of perjury under the laws of the State of California that

Date Signed 03/08/11  
(month, day, year)

Signature

Form 700 Expanded Statement  
2010/2011

**THOMAS J. HANSEN**

City of Paramount ♦ 16400 Colorado Avenue ♦ Paramount, CA 90723 ♦ (562) 220-2223

Agency	Position	Type of Statement
<p>County Sanitation Districts Nos. 1, 2 of Los Angeles County, Board of Directors</p> <p><u>Jurisdiction:</u> City of Paramount Other: Agency</p>	Director	<p><b><u>Annual Statement</u></b> The period covered is April 6, 2010 through December 31, 2010</p> <p style="text-align: center;">- AND -</p> <p><b><u>Leaving Office Statement</u></b> <u>Date Left:</u> March 1, 2011 The period covered is April 6, 2010 through the date of leaving office.</p>
<p>Greater Los Angeles County Vector Control District</p> <p><u>Jurisdiction:</u> City of Paramount Other: Special District</p>	Trustee	<p><b><u>Annual Statement</u></b> The period covered is January 1, 2010 through December 31, 2010</p>
<p>Orangeline Development Authority</p>	Alternate Director	<p><b><u>Annual Statement</u></b> The period covered is January 1, 2010 through December 31, 2010</p> <p style="text-align: center;">- AND -</p> <p><b><u>Leaving Office Statement</u></b> <u>Date Left:</u> March 1, 2011 The period covered is January 1, 2010 through the date of leaving office.</p>
<p>Southeast Area Animal Control Authority</p>	Alternate Commissioner	<p><b><u>Annual Statement</u></b> The period covered is January 1, 2010 through December 31, 2010</p>
<p>Southeast Water Coalition</p> <p><u>Jurisdiction:</u> Southeast Los Angeles County Cities</p>	Board Member	<p><b><u>Annual Statement</u></b> The period covered is January 1, 2010 through December 31, 2010</p>





**SCHEDULE D**  
**Income – Gifts**

Name  
THOMAS J. HANSEN

▶ NAME OF SOURCE  
CALMET SERVICES, INC.

ADDRESS (Business Address Acceptable)  
P.O. BOX 2137, PARAMOUNT, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
TRASH & RECYCLING CO.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 12 / 10</u>	<u>\$ 100.00</u>	<u>DINNER</u>
<u>05 / 13 / 10</u>	<u>\$ 190.00</u>	<u>GOLF TOURNAMENT</u>
<u>    /    /    </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE

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

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>

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<u>    /    /    </u>	<u>\$</u>	<u></u>

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