

STATEMENT OF ECONOMIC INTERESTS

Date Received
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FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

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Please type or print in ink.

NAME OF FILER (LAST) MARTINEZ (FIRST) DIANE (MIDDLE) CITY OF PARAMOUNT 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: _____ 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." 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

Total number of pages including this cover page: 2



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

Date Signed March 29, 2011 (month, day, year)

Signature

SCHEDULE D
Income – Gifts

Name
DIANE J. MARTINEZ

▶ NAME OF SOURCE
CALMET
 ADDRESS (Business Address Acceptable)
7202 PETTERSON, PARAMOUNT, CA 90723
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
REFUSE HAULER

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 13 / 10</u>	<u>\$ 190.00</u>	<u>GOLF</u>
<u>10 / 29 / 10</u>	<u>\$ 125.00</u>	<u>GOLF</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>
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Comments: _____