

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

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CITY CLERK

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Warren, Carol T.

1. Office, Agency, or Court

Agency Name
City of Stanton
Division, Board, Department, District, if applicable
Your Position
City Council
Council Member

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

Agency: Redevelopment Agency/Parking Authority Position: Agency Member/Authority Member

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

- State
- Multi-County _____
- City of Stanton
- 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: 5

- 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



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 2-22-11
(month, day, year)

Signature

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name <div style="border: 1px solid black; padding: 2px; text-align: center;">Carol T. Warren</div> |

▶ NAME OF BUSINESS ENTITY
Apple Computers

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computers

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:
 _____ / _____ / 10 _____ / _____ / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
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 _____ / _____ / 10 _____ / _____ / 10
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Carol T. Warren

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Antarra Communications

ADDRESS (Business Address Acceptable)
11601 Court Lane, Anaheim, CA 92804

BUSINESS ACTIVITY, IF ANY, OF SOURCE
PR/Marketing

YOUR BUSINESS POSITION
Principal

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership
 Sale of _____
(Property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership
 Sale of _____
(Property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, 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:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

INTEREST RATE TERM (Months/Years)
_____ % None _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address
_____ City
 Guarantor _____
 Other _____
(Describe)

Comments: _____

SCHEDULE D Income – Gifts

Name

Carol T. Warren

▶ NAME OF SOURCE
Burke, Williams & Sorensen, LLP
ADDRESS (Business Address Acceptable)
2875 Michelle Drive, Suite 350, Irvine, CA 92606
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Dinner

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|------------------------|
| <u>12 / 02 / 10</u> | <u>\$ 160.00</u> | <u>Dinner</u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |

▶ NAME OF SOURCE
Manufactured Housing Education Trust
ADDRESS (Business Address Acceptable)
25241 Paseo de Alicia, Suite 120, Laguna Hills, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE
27th Annual Holiday Breakfast

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|------------------------|
| <u>12 / 01 / 10</u> | <u>\$ 100.00</u> | <u>Breakfast</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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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> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |

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|-----------------|------------|------------------------|
| <u> / / </u> | <u>\$ </u> | <u> </u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |

Comments: _____