CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

EB

COVER PAGE

Date Received
Official Use Only

SCO-PERSONNEL
HUMAN RESOURCES

2011 MAR -1 AM 9:44

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
CHIANG	JOHN	

1. Office, Agency, or Court

Agency Name

STATE CONTROLLER'S OFFICE — Division, Board, Department, District, if applicable

CALIFORNIA STATE CONTROLLER — Your Position

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

Agency: _____ Position: _____

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

- [x] State
- [ ] Multi-County _____
- [ ] City of _____
- [ ] Judge (Statewide Jurisdiction)
- [ ] County of _____
- [ ] Other _____

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

- [x] **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:** 15

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

-or-

- [ ] **None** - *No reportable interests on any schedule*

(d)(5)

I certify under penalty of perjury under the laws of the State of California

(d)(5)

Date Signed 2/28/11 *(month, day, year)*

Sign

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: John Chiang

▶ 1. BUSINESS ENTITY OR TRUST

BUNDLE UP JOY
Name

(d)(5)

Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
BABY CLOTHING

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

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☒ SPOUSE'S BUSINESS Other

YOUR BUSINESS POSITION NONE

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ $0 - $499
☐ $500 - $1,000
☒ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

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

▶ 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
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold _____ Yrs. remaining ☐ Other _____

☐ 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
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☐ _____ 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
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

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

▶ 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
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold _____ Yrs. remaining ☐ Other _____

☐ 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

Name: JOHN CHIANG

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME: DUNN EDWARDS

ADDRESS *(Business Address Acceptable)*: 4885 E. 52nd PLACE, LOS ANGELES, CA 90058

BUSINESS ACTIVITY, IF ANY, OF SOURCE: PAINT

YOUR BUSINESS POSITION: MARKETING

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: _____% ☐ None

TERM (Months/Years)

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

Comments:

CALIFORNIA FORM **700**
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Name: John Chiang

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE
Bet Tzedek
ADDRESS (Business Address Acceptable)
145 S. Fairfax Avenue, #200 Los Angeles, CA 90036
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legal Services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/13/10	$ 150	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Los Angeles County Federation of Labor
ADDRESS (Business Address Acceptable)
2130 James M. Woods Bl. Los Angeles 90006
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/15/10	$ 70	Martin Luther King Breakfast
3/9/10	$ 20	Legislative Reception
/ /	$	

▶ NAME OF SOURCE
Alborali Delavella
ADDRESS (Business Address Acceptable)
1531 12th St., #105 Santa Monica 90401
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Food

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/15/10	$ 370.00	2 Laker Tickets
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Consumer Attorneys Association of Los Angele
ADDRESS (Business Address Acceptable)
800 W. 6th St. #700 Los Angeles, CA 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/23/10	$ 110	Installation Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE
American Israel Public Affairs Committee
ADDRESS (Business Address Acceptable)
6310 San Vicente Bl #275, Los Angeles, CA 90048
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public Affairs

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/27/10	$ 110	Annual Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE
AEG
ADDRESS (Business Address Acceptable)
800 W. Olympic Bl. #305 Los Angeles 90015
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Sports and Entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/11/10	$ 97*	LA Kings Tickets,
/ /	$	Reception
/ /	$	

Comments: * I delivered congratulatory remarks for black history month.

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SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Agribusiness President's Council
ADDRESS (Business Address Acceptable): 1521 I St., Sacramento, 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/17/10	$ 41	Reception
/ /	$	
/ /	$	

▶ NAME OF SOURCE: California Cotton Ginner and Growers Association
ADDRESS (Business Address Acceptable): 1785 N. Fine Ave., Fresno 93727
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/17/10	$ 45.00 *	Cotton Towels
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Japanese American Bar Association
ADDRESS (Business Address Acceptable): P.O. Box 86812, Los Angeles 90086
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/19/10	$ 110.00	Installation Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Central City Optimist Club
ADDRESS (Business Address Acceptable): 28634 S. Western Ave., #462, Rancho Palos Verdes 90275
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Service Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/20/10	$ 50	Banquet Ticket - Wife
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Fox Entertainment Group
ADDRESS (Business Address Acceptable): P.O. Box 900, Beverly Hills 90213
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/21/10	$ 20	Movie Tickets
6/30/10	$ 31.98	Movie Ticket - Wife
/ /	$	

▶ NAME OF SOURCE: Valley Industry and Commerce Association
ADDRESS (Business Address Acceptable): 5121 Van Nuys Bl. #203 Sherman Oaks 91403
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Business Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/26/10	$ 45	State Officeholders Dinner
6/17/10	$ 63	Hall of Fame Dinner
/ /	$	

Comments: * Towels donated to ACC Nursing Home after 30 days of receipt

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SCHEDULE D
Income – Gifts

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Hong Kong Association of Southern California	350 S. Figueroa #139, Los Angeles 90071	Cultural	2/27/10	$ 90*	Chinese New Year Dinner
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
California Science Foundation	700 Exposition Drive, Los Angeles 90037	Science Education	3/20/10	$ 85	Ecosystems Grand Opening Gala
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
American Jewish Committee	9911 W. Pico Bl., #1602 Los Angeles 90035		3/17/10	$ 125	Awards Dinner
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Southern California Chinese Lawyers Association	P.O. Box 861959 Terminal Annex, Los Angeles 90086	Legal	3/26/10	$ 100	Installation Dinner
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
National Association of Women Business Owners - Los Angeles	900 Wilshire Bl #404 Los Angeles 90017	Business	3/19/10	$ 150	Luncheon
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
University of South Florida Foundation	4202 East Fowler Ave, ALC 100, Tampa, Florida 33620	Education	4/11/10	$ 50	Brunch
			/ /	$	
			/ /	$	

Comments: *I gave congratulatory remarks.

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SCHEDULE D
Income – Gifts

► NAME OF SOURCE
United Nurses Association of California
ADDRESS (Business Address Acceptable)
955 Overland Court, #150, San Dimas 91773
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/16/10	$ 37.67	Reception
12/10/10	$ 36.50	Open House and
/ /	$	Retirement Celebration

► NAME OF SOURCE
Paul Arne
ADDRESS (Business Address Acceptable)
556 S. Fair Oaks Avenue, Suite #1014, #468, Pasadena 91105
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Consultant

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/17/10	$ 125	California Democratic
/ /	$	Party Dinner Ticket
/ /	$	

► NAME OF SOURCE
Lynn Fukuhara-Arthurs
ADDRESS (Business Address Acceptable)
10153 -1/2 Riverside Dr, #111, Toluca Lake 91602
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/19/10	$ 400.00	Awards Dinner
/ /	$	Ticket - East West
/ /	$	Players

► NAME OF SOURCE
Yucaipa Companies
ADDRESS (Business Address Acceptable)
9130 W. Sunset Blvd., Los Angeles 90069
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Investments

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/20/10	$ 50	Annual Meeting -
/ /	$	lunch
/ /	$	

► NAME OF SOURCE
Steve and Heather Mnuchin
ADDRESS (Business Address Acceptable)
887 East Walnut, Pasadena 91101
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Financial

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/25/10	$ 175.00	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE
Milken Institute
ADDRESS (Business Address Acceptable)
1250 Fourth Street, Santa Monica 90401
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Educational

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/26/10	$ 75	lunch
4/27/10	$ 50*	breakfast
/ /	$	

Comments: *Breakfast sponsored by Ewing Marion Kaufman Foundation, 4801 Rockhill Road, Kansas City, Missouri 64110. Financial Education Nonprofit. I was asked to comment about California's fiscal condition.

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SCHEDULE D
Income – Gifts

► NAME OF SOURCE: California Latino Legislative Caucus
ADDRESS (Business Address Acceptable): State Capitol Room 5100, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legislative

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/3/10	$ 53.60*	Latino Spirit Awards Reception
/ /	$	
/ /	$	

► NAME OF SOURCE: California Women for Agriculture
ADDRESS (Business Address Acceptable): P.O. Box 313, Kingsburg, CA 93631
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/4/10	$ 80	Reception
/ /	$	
/ /	$	

► NAME OF SOURCE: Hollenbeck Police Business Council
ADDRESS (Business Address Acceptable): 2015 East First Street, Los Angeles, CA 90033
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Youth Services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/8/10	$ 80.00	Family of the Year Award Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: AHMC Health Foundation
ADDRESS (Business Address Acceptable): 438 W. Las Tunas Drive, San Gabriel, CA 91776
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Healthcare Services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/8/10	$ 83.00	Gala - Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: Orange County Asian Bar Association
ADDRESS (Business Address Acceptable): 6789 Quail Hill Parkway, #204 Irvine, CA 92603
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/13/10	$ 85	Installation Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: CalChamber
ADDRESS (Business Address Acceptable): 1215 K Street, #1400, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Business

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/17/10	$ 64.07	Dinner
/ /	$	
/ /	$	

Comments: * Value for two tickets. I did not use the second ticket.

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Name: John Chiang

SCHEDULE D
Income – Gifts

► NAME OF SOURCE: Victor Parks
ADDRESS (Business Address Acceptable): 650 Fifth Avenue, New York, NY 10185
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Finance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/18/10	$ 150	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: Pres. William J. Chintori
ADDRESS (Business Address Acceptable): 55 West 125th St. New York, NY 10027
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Public Policy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/19/10	$ 125 (est)*	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: UCLA Burkle Center for International Relations
ADDRESS (Business Address Acceptable): 11353 Bunch Hall, Box 951487, Los Angeles, CA 90095
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/24/10	$ 68	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: Global Green USA
ADDRESS (Business Address Acceptable): 2218 Main St., 2nd Flr., Santa Monica, CA 90405
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Environment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
6/12/10	$ 25	Reception
6/12/10	$ 75	Dinner
/ /	$	

► NAME OF SOURCE: Public Counsel
ADDRESS (Business Address Acceptable): P.O. Box 76900, Los Angeles, CA 90076
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
6/16/10	$ 100.00	William O. Douglas
/ /	$	Award dinner
/ /	$	

► NAME OF SOURCE: Maria Chen
ADDRESS (Business Address Acceptable): 7175 Sharon Drive, San Jose, CA 95129
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Auto

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
6/19/10	$ 120.00	Chamber Dinner
/ /	$	
/ /	$	

Comments: * Assistant said it was a social dinner, and there was no gift value. Group appetizers, salad, fish, skipped dessert, diet coke. Invitation came from Pres. Clinton's office. Hosts could include others.

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Name: John Chiang

SCHEDULE D
Income – Gifts

► NAME OF SOURCE: Seyfarth Shaw
ADDRESS (Business Address Acceptable): 333 S. Hope St, #3900, Los Angeles, CA 90071
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
6/24/10	$ 135.00	Los Angeles County Bar Association Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: Alta Med
ADDRESS (Business Address Acceptable): 500 Citadel Drive, #490, Los Angeles, CA 90040
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Health Care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/9/10	$ 60	Ticket to fundraiser
/ /	$	
/ /	$	

► NAME OF SOURCE: California Labor Federation
ADDRESS (Business Address Acceptable): 600 S. Grand Ave, #410, Oakland, CA 94610
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/13/10	$ 35*	Lunch
12/6/10	$ 16.44	Reception
/ /	$	

► NAME OF SOURCE: Steve Zahn
ADDRESS (Business Address Acceptable): 2126 W. 234th Street, Torrance, CA 90501
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/11/10	$ 70	Dodger Ticket
7/11/10	$ 75	Food
/ /	$	

► NAME OF SOURCE: California Teachers Association
ADDRESS (Business Address Acceptable): 1118 10th Street, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8/1/10	$ 43.99	Reception**
/ /	$	
/ /	$	

► NAME OF SOURCE: Taiwanese American Citizens League
ADDRESS (Business Address Acceptable): 3001 Walnut Grove #7, Rosemead, CA 91770
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Cultural, Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8/7/10	$ 100.00	25th Anniversary Dinner - wife's Ticket
/ /	$	
/ /	$	

Comments: * I gave a speech after the lunch. ** I gave remarks about the State's fiscal condition.

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SCHEDULE D
Income – Gifts

► NAME OF SOURCE: Project by Project Southern California
ADDRESS (Business Address Acceptable): 2355 Westwood Blvd, #246, Los Angeles 90064
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Charitable

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8/14/10	$ 200.00*	Reception - Me,
/ /	$	wife given a ticket
/ /	$	

► NAME OF SOURCE: Long Term Care Workers Service Employees International Union - United
ADDRESS (Business Address Acceptable): 2515 Beverly Bl., Los Angeles, CA 90057
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/3/10	$ 69.00	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: Chinese American Museum
ADDRESS (Business Address Acceptable): 125 Paseo de la Plaza, #300, Los Angeles, CA 90012
BUSINESS ACTIVITY, IF ANY, OF SOURCE: History, Culture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/19/10	$ 60	Banquet
/ /	$	
/ /	$	

► NAME OF SOURCE: Kevin Chen
ADDRESS (Business Address Acceptable): 35 West Valley Blvd., Alhambra, CA 91801
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Food

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/19/10	$ 70	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: Miguel Contreras Foundation
ADDRESS (Business Address Acceptable): 2404 Wilshire Bl., #5A, Los Angeles, CA 90057
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/21/10	$ 95**	Reception, Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: United Chamber of Commerce
ADDRESS (Business Address Acceptable): 5121 Van Nuys Bl., #208 Sherman Oaks, CA 91403
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Business

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/22/10	$ 50	Luncheon
/ /	$	
/ /	$	

Comments: * I presented a certificate ** I did not have dinner.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: John Chiang

SCHEDULE D
Income – Gifts

► NAME OF SOURCE: Korean Consul General Los Angeles
ADDRESS (Business Address Acceptable): 3243 Wilshire Blvd., Los Angeles, CA 90010
BUSINESS ACTIVITY, IF ANY, OF SOURCE: International Affair's

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10/1/10	$ 50	National Day Reception
/ /	$	
/ /	$	

► NAME OF SOURCE: Chinese Club of San Marino
ADDRESS (Business Address Acceptable): 2425 Huntington Dr., San Marino, CA 91108
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Cultural

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/6/10	$ 100*	Dinner Ticket for wife
/ /	$	
/ /	$	

► NAME OF SOURCE: Central Health Plan
ADDRESS (Business Address Acceptable): 1540 Bridgegate Dr., Diamond Bar, CA 91765
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Health care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/13/10	$ 67.20	Newspaper Ad
/ /	$	
/ /	$	

► NAME OF SOURCE: Mandy Kajioka
ADDRESS (Business Address Acceptable): 3240 Arden Way, Sacramento, CA 95825
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Law Enforcement

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/17/10	$ 125	Kings Ticket and dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: Stewart Kim
ADDRESS (Business Address Acceptable): 11111 Santa Monica Bl, #910, Los Angeles, CA 90025
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Finance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/29/10	$ 99	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE: Travis Smiley
ADDRESS (Business Address Acceptable): 4434 Crenshaw Bl., Los Angeles, CA 90043
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Media

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/2/10	$ 200	Dinner - me and my wife
/ /	$	
/ /	$	

Comments: * I was keynote speaker.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: John Chiang

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Allied Physicians IPA
ADDRESS (Business Address Acceptable): 1668 S. Garfield Ave, 2nd Flr. Alhambra, CA 91801
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Health Care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/11/10	$ 85	Holiday Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: San Francisco Business Times
ADDRESS (Business Address Acceptable): 275 Battery St., #940, San Francisco, CA 94111
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Media

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/3/10	$ 65	Breakfast Event
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Jordan Kaplan
ADDRESS (Business Address Acceptable): 808 Wilshire Bl #200, Santa Monica, CA 90401
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/9/10	$ 53	lunch
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Lee Haynes
ADDRESS (Business Address Acceptable): 2013 N. Cirby Way, Roseville, CA 95661
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Law Enforcement

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/15/10	$ 300	Lakers Jersey
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Richard McWhorter
ADDRESS (Business Address Acceptable): 225 S. Lake Ave, Pasadena, CA 91101
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Financial

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/27/10	$ 100	Dinner
12/16/10	$ 100	Dinner
/ /	$	

▶ NAME OF SOURCE: Robert Lin
ADDRESS (Business Address Acceptable): 18725 E. Gale Ave, #140 City of Industry, CA 91748
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Doctor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/22/10	$ 150* (est)	Clippers Ticket
/ /	$	and dinner
/ /	$	

Comments: * Multiple inquiries about gift value were made.

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name: John Chiang

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Garfield Medical Center
ADDRESS (Business Address Acceptable): 525 N. Garfield Ave. Monterey Park, CA 91754
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Health Care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/12/10	$ 150	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: The California Museum for History, Women and the Arts
ADDRESS (Business Address Acceptable): 1200 O Street, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Educational

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/14/10	$ 50* (est)	Hall of Fame Gala
/ /	$	
/ /	$	

▶ NAME OF SOURCE
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	$	
/ /	$	
/ /	$	

▶ NAME OF SOURCE
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	$	
/ /	$	
/ /	$	

▶ NAME OF SOURCE
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	$	
/ /	$	
/ /	$	

▶ NAME OF SOURCE
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	$	
/ /	$	
/ /	$	

Comments: * Multiple inquiries about gift value have been made.

SCHEDULE E
Income – Gifts
Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
John Chiang

- **Reminder – you must mark the gift or income box.**
- **You are not required to report income from government agencies.**
- **You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the $420 gift limit.**

▶ NAME OF SOURCE
Aspen Institute
ADDRESS *(Business Address Acceptable)*
1000 North Third Street
CITY AND STATE
Aspen, CO 81611
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☒ 501 (c)(3)
Educational
DATE(S): 7/5/10 - 7/6/10 *(If applicable)* AMT: $ 550.00
TYPE OF PAYMENT: (must check one) ☒ Gift ☐ Income
DESCRIPTION: Airline Ticket to Speak at Conference. Ticket was not used; travel cancelled because of state budget crisis

▶ NAME OF SOURCE
ADDRESS *(Business Address Acceptable)*
CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)
DATE(S): ___/___/___ - ___/___/___ *(If applicable)* AMT: $
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION:

▶ NAME OF SOURCE
ADDRESS *(Business Address Acceptable)*
CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)
DATE(S): ___/___/___ - ___/___/___ *(If applicable)* AMT: $
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION:

▶ NAME OF SOURCE
ADDRESS *(Business Address Acceptable)*
CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)
DATE(S): ___/___/___ - ___/___/___ *(If applicable)* AMT: $
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION:

Comments:

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
16 MAR 29 AM 11:22

SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CG

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

▶ NAME OF BUSINESS ENTITY
Dunn Edwards*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Paint

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 ACQUIRED ___/___/ 10 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
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ○ Income Received of $0 - $499
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IF APPLICABLE, LIST DATE:
___/___/ 10 ACQUIRED ___/___/ 10 DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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IF APPLICABLE, LIST DATE:
___/___/ 10 ACQUIRED ___/___/ 10 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
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ○ Income Received of $0 - $499
○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:
___/___/ 10 ACQUIRED ___/___/ 10 DISPOSED

Verification

Print Name John Chiang

Office, Agency or Court California State Controller

Statement Type ☒ 2010/2011 Annual ☐ Assuming ☐ Leaving
☐ ____ (yr) Annual ☐ Candidate

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 that the foregoing is true and correct.

Date Signed March 18, 2016 *(month, day, year)*

Signature (d)(5)

Comments: *Spouse ESOP