

COVER PAGE

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2011 MAR -1 PM 5:05

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Dutton Robert Dale

1. Office, Agency, or Court

Agency Name  
State Senate  
Division, Board, Department, District, if applicable  
31st District  
Your Position  
State Senator

► 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 \_\_\_\_\_  Other \_\_\_\_\_

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

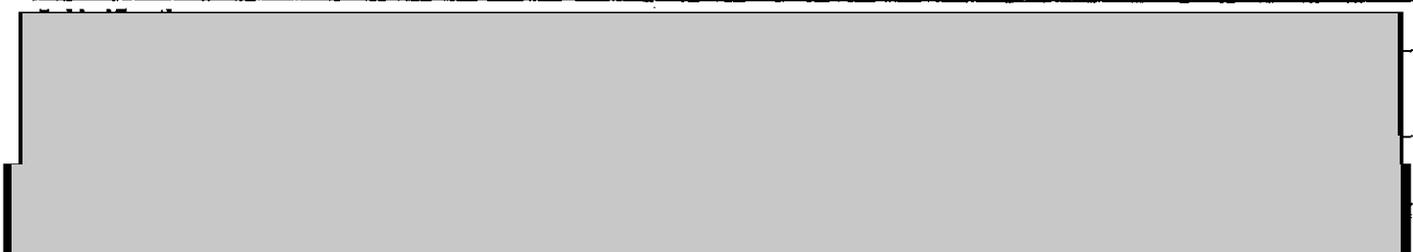
Annual: The period covered is January 1, 2010, through December 31, 2010. -or-  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2010. (Check one)  
 Assuming Office: Date \_\_\_\_/\_\_\_\_/\_\_\_\_  The period covered is January 1, 2010, through the date of leaving office.  
 Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_  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: 16

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

Date Signed February 28, 2011  
(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.*

|   |
|---|
| <b>CALIFORNIA FORM 700</b><br>FAIR POLITICAL PRACTICES COMMISSION<br>Name<br><b>Robert D Dutton</b> |
|---|

▶ NAME OF BUSINESS ENTITY  
**United Investors LLC**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Invest in Div Pacific Opp Fund**

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** / **1** / **10**  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Western Hills Estates LTD**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Raw Land**

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  
**ISHRS MSCI Emerging Markets**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**index fund**

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  
 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  
 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  
 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

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

**SCHEDULE A-1**  
**Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)  
*Do not attach brokerage or financial statements.*

Name  
**Robert D Dutton**

▶ NAME OF BUSINESS ENTITY  
**TEVA Pharmaceuticals ADR**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Pharmaceuticals**

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  
**International Business Machines Corp**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Business Machines**

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  
**Walmart Stores**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**retail**

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  
**ISHS S&P/TOPIX**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**index fund**

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  
**Chevron**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Energy**

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:  
**4** / **26** / **10**      \_\_\_\_\_ / \_\_\_\_\_ / **10**  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Market Vectors AGRIBUS ETF**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**index fund**

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

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

**SCHEDULE A-1**

**Investments**

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

Do not attach brokerage or financial statements.

|  |
|--|
| <p><b>CALIFORNIA FORM 700</b><br/>FAIR POLITICAL PRACTICES COMMISSION</p> <p>Name<br/><b>Robert D Dutton</b></p> |
|--|

▶ NAME OF BUSINESS ENTITY  
**NASDAQ 100 Series (QQQQ)**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**index fund**

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 **Index Fund**  
(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  
**CVB Financial CP**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**commercial bank**

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  
**Vineyard National Bank - see comment**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**commercial bank**

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  
**Prudential Financial Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Financial services**

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  
**NRG Energy Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**energy provider**

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  
**Health Care Select**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Health Index fund**

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 **index fund**  
(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

Comments: Vineyard Bank taking over by FDIC, stock worth less than \$2000 will continue to list until sold



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

**1. BUSINESS ENTITY OR TRUST**

Dutton & Associates

Name  
10681 Foothill Blvd. suite 340, Rancho Cucamonga, CA

Address (Business Address Acceptable)

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

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
real estate investments

|  |                              |
|--|------------------------------|
| FAIR MARKET VALUE                                      | IF APPLICABLE, LIST DATE:    |
| <input checked="" type="checkbox"/> \$2,000 - \$10,000 | ____/____/10    ____/____/10 |
| <input type="checkbox"/> \$10,001 - \$100,000          | ACQUIRED    DISPOSED         |
| <input type="checkbox"/> \$100,001 - \$1,000,000       |                              |
| <input type="checkbox"/> Over \$1,000,000              |                              |

NATURE OF INVESTMENT  
 Sole Proprietorship     Partnership     Other

YOUR BUSINESS POSITION Partner

**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.)**

none

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

Check one box:  
 INVESTMENT     REAL PROPERTY

none

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      | ____/____/10    ____/____/10 |
| <input type="checkbox"/> \$10,001 - \$100,000    | ACQUIRED    DISPOSED         |
| <input type="checkbox"/> \$100,001 - \$1,000,000 |                              |
| <input type="checkbox"/> Over \$1,000,000        |                              |

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: \_\_\_\_\_

**1. BUSINESS ENTITY OR TRUST**

West End Investments

Name  
10681 Foothill Blvd. Suite340, Rancho Cucamonga, CA

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              | ____/____/10    ____/____/10 |
| <input checked="" type="checkbox"/> \$10,001 - \$100,000 | ACQUIRED    DISPOSED         |
| <input type="checkbox"/> \$100,001 - \$1,000,000         |                              |
| <input type="checkbox"/> Over \$1,000,000                |                              |

NATURE OF INVESTMENT  
 Sole Proprietorship     Partnership     Other

YOUR BUSINESS POSITION Partner

**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.)**

Ninety Nine Limited

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

Check one box:  
 INVESTMENT     REAL PROPERTY

none

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      | ____/____/10    ____/____/10 |
| <input type="checkbox"/> \$10,001 - \$100,000    | ACQUIRED    DISPOSED         |
| <input type="checkbox"/> \$100,001 - \$1,000,000 |                              |
| <input type="checkbox"/> Over \$1,000,000        |                              |

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



**SCHEDULE D**  
**Income – Gifts**

Name  
 Senator Bob Dutton

▶ NAME OF SOURCE  
Viejas Band of Kumeyaay Indians  
 ADDRESS (Business Address Acceptable)  
1 Viejas Grade Road, Alpine, CA 91901  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes tribal issues

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>09 / 14 / 10</u> | <u>\$ 71.76</u> | <u>Food &amp; Drink</u> |
| <u>  /  /  </u>     | <u>\$</u>       | <u>  </u>               |
| <u>  /  /  </u>     | <u>\$</u>       | <u>  </u>               |

▶ NAME OF SOURCE  
League of California Cities  
 ADDRESS (Business Address Acceptable)  
1400 K St., Su. 400, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes common interests of CA cities

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>11 / 04 / 10</u> | <u>\$ 45.58</u> | <u>Food &amp; Drink</u> |
| <u>  /  /  </u>     | <u>\$</u>       | <u>  </u>               |
| <u>  /  /  </u>     | <u>\$</u>       | <u>  </u>               |

▶ NAME OF SOURCE  
San Manuel Band of Mission Indians  
 ADDRESS (Business Address Acceptable)  
26569 Community Center Dr., Highland, CA 92346  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes tribal issues

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>12 / 06 / 10</u> | <u>\$ 26.66</u> | <u>Food &amp; Drink</u> |
| <u>  /  /  </u>     | <u>\$</u>       | <u>  </u>               |
| <u>  /  /  </u>     | <u>\$</u>       | <u>  </u>               |

▶ NAME OF SOURCE  
CA Medical Association  
 ADDRESS (Business Address Acceptable)  
1201 J St., Su. 200, Sac. CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents physicians & their patients

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>12 / 06 / 10</u> | <u>\$ 23.88</u> | <u>Food &amp; Drink</u> |
| <u>  /  /  </u>     | <u>\$</u>       | <u>  </u>               |
| <u>  /  /  </u>     | <u>\$</u>       | <u>  </u>               |

▶ NAME OF SOURCE  
AimPoint  
 ADDRESS (Business Address Acceptable)  
1020 12th St., Su. 401, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
A political organization

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>12 / 07 / 10</u> | <u>\$ 35.00</u> | <u>Food &amp; Drink</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>              |

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

**SCHEDULE D**  
**Income – Gifts**

Name  
 Senator Bob Dutton

▶ NAME OF SOURCE  
CA State Sheriffs' Association  
 ADDRESS (Business Address Acceptable)  
1231 I Street, Su. 200, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes law enforcement issues

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>05 / 18 / 10</u> | <u>\$ 58.49</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |

▶ NAME OF SOURCE  
CA Hospital Association  
 ADDRESS (Business Address Acceptable)  
1215 K St., Su. 800, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents CA public hospital systems

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)  |
|---------------------|------------------|-------------------------|
| <u>06 / 01 / 10</u> | <u>\$ 200.00</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>       |

▶ NAME OF SOURCE  
CA Association of Realtors  
 ADDRESS (Business Address Acceptable)  
525 South Virgil Ave., L.A., CA 90020  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes interests of CA real estate agents

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>06 / 09 / 10</u> | <u>\$ 49.00</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |

▶ NAME OF SOURCE  
Institute of Governmental Advocates  
 ADDRESS (Business Address Acceptable)  
915 L St., Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents lobbyists and lobbying firms

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)  |
|---------------------|------------------|-------------------------|
| <u>07 / 08 / 10</u> | <u>\$ 237.30</u> | <u>Lodging</u>          |
| <u>07 / 09 / 10</u> | <u>\$ 127.05</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>       |

▶ NAME OF SOURCE  
Intuit Inc.  
 ADDRESS (Business Address Acceptable)  
2600 Capitol Avenue, Su. 300, Sac., CA 95816  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Builds Websites for small businesses

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>08 / 02 / 10</u> | <u>\$ 51.37</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |

▶ NAME OF SOURCE  
Senator Sam Blakeslee  
 ADDRESS (Business Address Acceptable)  
State Capitol, Room 4070, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Senator

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>08 / 31 / 10</u> | <u>\$ 29.79</u> | <u>Bottle of wine</u>  |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |

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

**SCHEDULE D**  
**Income – Gifts**

Name  
 Senator Bob Dutton

▶ NAME OF SOURCE  
National Federation of Independent Business  
 ADDRESS (Business Address Acceptable)  
921 11th Street, Su. 400, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes opportunities for independent businesses

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>04 / 28 / 10</u> | <u>\$ 66.78</u> | <u>Food &amp; Drink</u> |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |

▶ NAME OF SOURCE  
CA Building Industry Association  
 ADDRESS (Business Address Acceptable)  
1215 K Street, Su. 1200, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represent companies that plan & build communities

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>05 / 05 / 10</u> | <u>\$ 79.55</u> | <u>Food &amp; Drink</u> |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |

▶ NAME OF SOURCE  
CalChamber  
 ADDRESS (Business Address Acceptable)  
1215 K Street, Su. 1400, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Helps businesses comply w/federal & state laws

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)  |
|---------------------|------------------|-------------------------|
| <u>05 / 17 / 10</u> | <u>\$ 32.66</u>  | <u>Food &amp; Drink</u> |
| <u>05 / 17 / 10</u> | <u>\$ 64.07</u>  | <u>Food &amp; Drink</u> |
| <u>11 / 11 / 10</u> | <u>\$ 116.05</u> | <u>Food &amp; Drink</u> |

▶ NAME OF SOURCE  
California Refuse Recycling Council, N. District  
 ADDRESS (Business Address Acceptable)  
1121 L St., Su. 505, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents solid waste & recycling companies

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>05 / 18 / 10</u> | <u>\$ 41.33</u> | <u>Food &amp; Drink</u> |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |

▶ NAME OF SOURCE  
California Refuse Recycling Council, S. District  
 ADDRESS (Business Address Acceptable)  
1851 E. 1st St., Su. 1220, Santa Ana, CA 92705  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents solid waste & recycling companies

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>05 / 18 / 10</u> | <u>\$ 41.33</u> | <u>Food &amp; Drink</u> |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |

▶ NAME OF SOURCE  
The Walt Disney Company  
 ADDRESS (Business Address Acceptable)  
500 S. Buena Vista St., Burbank, CA 91521  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes entertainment

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)       |
|---------------------|-----------------|------------------------------|
| <u>05 / 18 / 10</u> | <u>\$ 14.25</u> | <u>Screening of Iron Man</u> |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                     |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                     |

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

**SCHEDULE D**  
**Income – Gifts**

Name  
 Senator Bob Dutton

▶ NAME OF SOURCE  
CA Ambulance Association  
 ADDRESS (Business Address Acceptable)  
2520 Venture Oaks Way, Suite 150, Sac., CA 95833  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents interests of ambulance services

| DATE (mm/dd/yy)     | VALUE          | DESCRIPTION OF GIFT(S) |
|---------------------|----------------|------------------------|
| <u>04 / 20 / 10</u> | <u>\$ 7.50</u> | <u>Drink</u>           |
| <u> / / </u>        | <u>\$ </u>     | <u> </u>               |
| <u> / / </u>        | <u>\$ </u>     | <u> </u>               |

▶ NAME OF SOURCE  
CA Rice Commission  
 ADDRESS (Business Address Acceptable)  
8801 Folsom Blvd, Su. 172, Sacramento, CA 95826  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes production of rice

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)      |
|---------------------|-----------------|-----------------------------|
| <u>02 / 10 / 10</u> | <u>\$ 28.71</u> | <u>Box of rice products</u> |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                    |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                    |

▶ NAME OF SOURCE  
Western States Petroleum Association  
 ADDRESS (Business Address Acceptable)  
1415 L St., Su. 1200, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes interests in petroleum

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>02 / 23 / 10</u> | <u>\$ 62.03</u> | <u>Food &amp; Drink</u> |
| <u>03 / 16 / 10</u> | <u>\$ 38.59</u> | <u>Food &amp; Drink</u> |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |

▶ NAME OF SOURCE  
Barona Band of Mission Indians  
 ADDRESS (Business Address Acceptable)  
1095 Barona Rd., Lakeside, CA 92040  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes tribal issues

| DATE (mm/dd/yy)      | VALUE           | DESCRIPTION OF GIFT(S)  |
|----------------------|-----------------|-------------------------|
| <u>03 / 02 / 10</u>  | <u>\$ 34.64</u> | <u>Food &amp; Drink</u> |
| <u>.09 / 14 / 10</u> | <u>\$ 56.25</u> | <u>Food &amp; Drink</u> |
| <u> / / </u>         | <u>\$ </u>      | <u> </u>                |

▶ NAME OF SOURCE  
Napa Valley Vintners  
 ADDRESS (Business Address Acceptable)  
P. O. Box 141, St. Helena, CA 94574  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents Napa Valley wineries

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>03 / 03 / 10</u> | <u>\$ 12.75</u> | <u>Food &amp; Drink</u> |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |

▶ NAME OF SOURCE  
Personal Insurance Federation of CA  
 ADDRESS (Business Address Acceptable)  
1201 K Street, Su. 1220, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents member companies on insurance matter

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>03 / 03 / 10</u> | <u>\$ 47.25</u> | <u>Food &amp; Drink</u> |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |
| <u> / / </u>        | <u>\$ </u>      | <u> </u>                |

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

**SCHEDULE D**  
**Income – Gifts**

Name  
 Senator Bob Dutton

▶ NAME OF SOURCE  
CA State Protocol Foundation  
 ADDRESS (Business Address Acceptable)  
1215 K St., Su. 1400, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Non-profit organization

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>01 / 06 / 10</u> | <u>\$ 35.47</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |

▶ NAME OF SOURCE  
Governor Arnold Schwarzenegger  
 ADDRESS (Business Address Acceptable)  
State Capitol, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Government

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>01 / 06 / 10</u> | <u>\$ 21.53</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |

▶ NAME OF SOURCE  
CA Tribal Business Alliance  
 ADDRESS (Business Address Acceptable)  
1530 J Street, Suite 250, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes business opportunities for CA tribes

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>01 / 12 / 10</u> | <u>\$ 92.68</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |

▶ NAME OF SOURCE  
Pacific Gas & Electric Company  
 ADDRESS (Business Address Acceptable)  
1415 L Street, Suite 280, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes the gas & electric business

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)  |
|---------------------|------------------|-------------------------|
| <u>01 / 19 / 10</u> | <u>\$ 159.37</u> | <u>Food &amp; Drink</u> |
| <u>07 / 20 / 10</u> | <u>\$ 209.86</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>       |

▶ NAME OF SOURCE  
CA Correctional Peace Officers Association  
 ADDRESS (Business Address Acceptable)  
755 Riverport Drive, W. Sacramento, CA 95605  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes interests of CA correctional officers

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>01 / 26 / 10</u> | <u>\$ 76.95</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |

▶ NAME OF SOURCE  
CA Taxpayers' Association  
 ADDRESS (Business Address Acceptable)  
1215 K Street, #1250, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes government efficiency

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)  |
|---------------------|-----------------|-------------------------|
| <u>01 / 27 / 10</u> | <u>\$ 11.30</u> | <u>Food &amp; Drink</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>       |

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

**SCHEDULE D**  
**Income - Gifts**

Name  
 Senator Bob Dutton

▶ NAME OF SOURCE  
CA Mortgage Bankers Association  
 ADDRESS (Business Address Acceptable)  
980 Ninth Street, Su. 2120, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes member banks

| DATE (mm/dd/yy)       | VALUE           | DESCRIPTION OF GIFT(S)      |
|-----------------------|-----------------|-----------------------------|
| <u>03 / 08 / 10</u>   | <u>\$ 33.51</u> | <u>Food &amp; Drink</u>     |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |

▶ NAME OF SOURCE  
CA State Council of Laborers  
 ADDRESS (Business Address Acceptable)  
1121 L St., Su. 502, Sac. CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Addresses issues of laborers

| DATE (mm/dd/yy)       | VALUE           | DESCRIPTION OF GIFT(S)      |
|-----------------------|-----------------|-----------------------------|
| <u>03 / 16 / 10</u>   | <u>\$ 46.46</u> | <u>Food &amp; Drink</u>     |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |

▶ NAME OF SOURCE  
Inland Empire Utilities Agency  
 ADDRESS (Business Address Acceptable)  
6075 Kimball Ave., Bldg. A, Chino, CA 91710  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Provides utility related services to communities

| DATE (mm/dd/yy)       | VALUE         | DESCRIPTION OF GIFT(S)      |
|-----------------------|---------------|-----------------------------|
| <u>03 / 16 / 10</u>   | <u>\$ .54</u> | <u>Food &amp; Drink</u>     |
| <u>    /    /    </u> | <u>\$</u>     | <u>                    </u> |
| <u>    /    /    </u> | <u>\$</u>     | <u>                    </u> |

▶ NAME OF SOURCE  
Southern California Contractors Association, Inc.  
 ADDRESS (Business Address Acceptable)  
6055 E. Washington Blvd., Su. 200, L.A., CA 90040  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents interest of union construction contractors

| DATE (mm/dd/yy)       | VALUE           | DESCRIPTION OF GIFT(S)      |
|-----------------------|-----------------|-----------------------------|
| <u>03 / 16 / 10</u>   | <u>\$ 35.00</u> | <u>Food &amp; Drink</u>     |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |

▶ NAME OF SOURCE  
California State Floral Association  
 ADDRESS (Business Address Acceptable)  
1521 I St., Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents Floral Industry

| DATE (mm/dd/yy)       | VALUE           | DESCRIPTION OF GIFT(S)      |
|-----------------------|-----------------|-----------------------------|
| <u>03 / 23 / 10</u>   | <u>\$ 16.95</u> | <u>Bouquet of flowers</u>   |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |

▶ NAME OF SOURCE  
Personal Care Products Council  
 ADDRESS (Business Address Acceptable)  
925 L Street, Suite 850, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Rep. consumer & personal care products industries

| DATE (mm/dd/yy)       | VALUE           | DESCRIPTION OF GIFT(S)      |
|-----------------------|-----------------|-----------------------------|
| <u>04 / 07 / 10</u>   | <u>\$ 10.17</u> | <u>Food &amp; Drink</u>     |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |
| <u>    /    /    </u> | <u>\$</u>       | <u>                    </u> |

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

**SCHEDULE D  
Income - Gifts**

▶ NAME OF SOURCE  
3M Company

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 6.27</u>  | <u>Various</u>         |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |

▶ NAME OF SOURCE  
The Clorox Company

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 7.35</u>  | <u>Various</u>         |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |

▶ NAME OF SOURCE  
Ecolab Inc.

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ .60</u>   | <u>Various</u>         |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |

▶ NAME OF SOURCE  
Farnam Companies, Inc.

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 6.68</u>  | <u>Various</u>         |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |

▶ NAME OF SOURCE  
Henkel Consumer Goods, Inc.

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 4.75</u>  | <u>Various</u>         |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |

▶ NAME OF SOURCE  
Honeywell Consumer Products Group

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 4.50</u>  | <u>Various</u>         |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>      |

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

## SCHEDULE D Income – Gifts

|  |
|--|
| <b>CALIFORNIA FORM 700</b>                         |
| <small>FAIR POLITICAL PRACTICES COMMISSION</small> |
| Name<br><br>Robert D. Dutton                       |

▶ NAME OF SOURCE  
McLaughlin Gormley King

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE          | DESCRIPTION OF GIFT(S) |
|---------------------|----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 1.85</u> | <u>Various</u>         |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |

▶ NAME OF SOURCE  
Procter & Gamble

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE          | DESCRIPTION OF GIFT(S) |
|---------------------|----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 9.24</u> | <u>Various</u>         |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |

▶ NAME OF SOURCE  
Reckitt Benckiser, Inc.

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE          | DESCRIPTION OF GIFT(S) |
|---------------------|----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 4.96</u> | <u>Various</u>         |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |

▶ NAME OF SOURCE  
SC Johnson - A Family Company

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE          | DESCRIPTION OF GIFT(S) |
|---------------------|----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 5.35</u> | <u>Various</u>         |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |

▶ NAME OF SOURCE  
The Scott's Company

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE          | DESCRIPTION OF GIFT(S) |
|---------------------|----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 6.41</u> | <u>Various</u>         |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |

▶ NAME OF SOURCE  
Shell Lubricants Company

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE          | DESCRIPTION OF GIFT(S) |
|---------------------|----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 6.98</u> | <u>Various</u>         |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |

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

# SCHEDULE D Income – Gifts

▶ NAME OF SOURCE  
Sherwin-Williams Diversified Brands

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE          | DESCRIPTION OF GIFT(S) |
|---------------------|----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 6.62</u> | <u>Various</u>         |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |

▶ NAME OF SOURCE  
WD-40 Company

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE          | DESCRIPTION OF GIFT(S) |
|---------------------|----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 3.58</u> | <u>Various</u>         |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>      | <u> </u>               |

▶ NAME OF SOURCE  
Consumer Specialty Products Association

ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>04 / 14 / 10</u> | <u>\$ 10.13</u> | <u>Bag</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>               |

▶ 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>               |

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

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
12 FEB 23 PM 1:05

EB

FEB 22 2012 DP

**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  
**AMENDMENT**

▶ NAME OF BUSINESS ENTITY  
**POWERSHARES QQQ TR ( name change)**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Index funds - see comment**

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 **Index Fund**  
(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  
 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  
 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  
 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  
 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

**Verification**

Print Name **Robert Dutton**

Office, Agency or Court **State Senator**

Statement Type     2010/2011 Annual     Assuming     Leaving  
 **10** Annual                                   Candidate  
(07)

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 \_\_\_\_\_ **2/21/12**  
(d)(5)

Signature \_\_\_\_\_

Comments: was NASDAQ 100 Series (QQQQ)



# SCHEDULE A-2

RECEIVED  
 FAIR POLITICAL PRACTICES COMMISSION  
 INVESTMENTS, Income, and Assets  
 of Business Entities/Trusts  
 (Ownership Interest is 10% or Greater)  
 12 FEB 23 PM 1:05

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
**AMENDMENT**

### 1. BUSINESS ENTITY OR TRUST

**Dutton & Associates**

Name  
 10681 Foothill Blvd. Suite 340, Rancho Cucamonga, CA

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    | /    / 10      12 / 31 / 10  |
| <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 checked="" type="checkbox"/> Partnership <input type="checkbox"/> Other |
| YOUR BUSINESS POSITION _____                     |  |

### 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  |  | /    / 10      /    / 10             |                                      |
| <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 |  |                                      |                                      |

### 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.)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

**Verification**

Print Name Robert Dutton

Office, Agency or Court State Senator

Statement Type     2010/2011 Annual     10 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) \_\_\_\_\_ et.

Date Signed 2/21/12    Signature \_\_\_\_\_  
(month, day, year)

SCHEDULE A-2

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
**AMENDMENT**

RECEIVED  
 FAIR POLITICAL  
 PRACTICES COMMISSION

**Investments, Income, and Assets  
 of Business Entities/Trusts**  
 (Ownership Interest is 10% or Greater)

12 FEB 23 PM 1:05

▶ 1. BUSINESS ENTITY OR TRUST

Dutton & Associates, Inc.

Name

10681 Foothill Blvd. Suite 340, Rancho Cucamonga, CA

Address (Business Address Acceptable)

Check one

- Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

|  |                                  |
|--|----------------------------------|
| <b>FAIR MARKET VALUE</b>                               | <b>IF APPLICABLE, LIST DATE:</b> |
| <input checked="" type="checkbox"/> \$2,000 - \$10,000 | /    /10      12/31/10           |
| <input type="checkbox"/> \$10,001 - \$100,000          | ACQUIRED      DISPOSED           |
| <input type="checkbox"/> \$100,001 - \$1,000,000       |                                  |
| <input type="checkbox"/> Over \$1,000,000              |                                  |

**NATURE OF INVESTMENT**  
 Sole Proprietorship     Partnership     Corporation     Other

**YOUR BUSINESS POSITION**    President / CEO

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

|  |   |
|--|---|
| <input type="checkbox"/> \$0 - \$499                   | <input type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$500 - \$1,000               | <input type="checkbox"/> OVER \$100,000       |
| <input checked="" type="checkbox"/> \$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.)

\_\_\_\_\_

\_\_\_\_\_

▶ 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

|  |                                  |
|--|----------------------------------|
| <b>FAIR MARKET VALUE</b>                         | <b>IF APPLICABLE, LIST DATE:</b> |
| <input type="checkbox"/> \$2,000 - \$10,000      | /    /10      /    /10           |
| <input type="checkbox"/> \$10,001 - \$100,000    | ACQUIRED      DISPOSED           |
| <input type="checkbox"/> \$100,001 - \$1,000,000 |                                  |
| <input type="checkbox"/> Over \$1,000,000        |                                  |

**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: \_\_\_\_\_

**Verification**

Print Name Robert Dutton

Office, Agency or Court State Senate

Statement Type     2010/2011 Annual     10 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)

Date Signed 2/21/12    Signature \_\_\_\_\_  
(month, day, year)



SCHEDULE A-2

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
**AMENDMENT**

RECEIVED  
 FAIR POLITICAL PRACTICES COMMISSION  
**Investments, Income, and Assets of Business Entities/Trusts**  
 (Ownership Interest is 10% or Greater)  
 12 FEB 23 PM 1:05

1. BUSINESS ENTITY OR TRUST

**West End Investments**  
 Name  
 10681 Foothill Blvd. Suite 340, Rancho Cucamonga, CA  
 Address (Business Address Acceptable)  
 Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

|  |                                  |
|--|----------------------------------|
| <b>FAIR MARKET VALUE</b>                               | <b>IF APPLICABLE, LIST DATE:</b> |
| <input checked="" type="checkbox"/> \$2,000 - \$10,000 | ____/____/10      12/31/10       |
| <input type="checkbox"/> \$10,001 - \$100,000          | ACQUIRED      DISPOSED           |
| <input type="checkbox"/> \$100,001 - \$1,000,000       |                                  |
| <input type="checkbox"/> Over \$1,000,000              |                                  |

**NATURE OF INVESTMENT**  
 Sole Proprietorship  Partnership  Other

**YOUR BUSINESS POSITION** Partner

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.)

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

|  |                                  |
|--|----------------------------------|
| <b>FAIR MARKET VALUE</b>                         | <b>IF APPLICABLE, LIST DATE:</b> |
| <input type="checkbox"/> \$2,000 - \$10,000      | ____/____/10      ____/____/10   |
| <input type="checkbox"/> \$10,001 - \$100,000    | ACQUIRED      DISPOSED           |
| <input type="checkbox"/> \$100,001 - \$1,000,000 |                                  |
| <input type="checkbox"/> Over \$1,000,000        |                                  |

**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: \_\_\_\_\_

**Verification**

Print Name Robert Dutton

Office, Agency or Court State Senate

Statement Type  2010/2011 Annual  10 Annual  Assuming  Leaving  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 (d)(5)

Date Signed 2/21/12 (month, day, year)      Signature \_\_\_\_\_