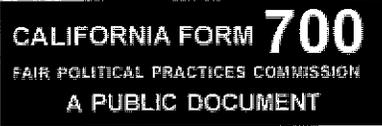


AT/AN 2012

Amendment - 2012



STATEMENT OF ECONOMIC INTERESTS

RECEIVED Date Received City of La Puente City Clerk's Office

COVER PAGE

Adds Schedule C

14 MAR 17 PM 4:36

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) Holloway Daniel C.

1. Office, Agency, or Court

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

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

Agency: La Puente Successor Agency Position: Agency Board Member

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

State Multi-County City of La Puente Judge or Court Commissioner (Statewide Jurisdiction) County of Other

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

Annual: The period covered is January 1, 2011, through December 31, 2012. Leaving Office: Date Left (Check one) The period covered is January 1, 2011, through the date of leaving office. Assuming Office: Date assumed Office sought, if different than Part 1: Candidates: Election Year Office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None." Total number of pages including this cover page: 2 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 None - No reportable interests on any schedule



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

Date Signed 3/13/14 (month, day, year)

Signature

Amendment - 2012

FAIR POLITICAL PRACTICES COMMISSION

SCHEDULE C

Income, Loans, & Business Positions

14 MAY 19 PM 1:56

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Daniel C. Holloway

1. INCOME RECEIVED NAME OF SOURCE OF INCOME UBS Financial Services Inc. ADDRESS (Business Address Acceptable) 301 E. Ocean Blvd., Long Beach, CA 90602 BUSINESS ACTIVITY, IF ANY, OF SOURCE Wealth Management YOUR BUSINESS POSITION Client GROSS INCOME RECEIVED [X] \$10,001 - \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED [X] Other IRA Retirement Disbursement (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 CONSIDERATION FOR WHICH INCOME WAS RECEIVED 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:

STATEMENT OF ECONOMIC INTERESTS

RECEIVED
CITY OF LA PUENTE
CITY CLERK'S OFFICE

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

13 MAR 26 PM 12:02

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Holloway Daniel C.

1. Office, Agency, or Court

Agency Name
City of La Puente
Division, Board, Department, District, if applicable
Your Position
City Council Member/Mayor

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

Agency: La Puente Successor Agency to the dissolved Community Development Commission
Position: Agency Member / Chairman

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

- State
- Multi-County _____
- City of La Puente
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is ____/____/____, through December 31, 2012.
- Assuming Office: Date assumed ____/____/____
- Leaving Office: Date Left ____/____/____ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached
- or-
- None - No reportable interests on any schedule

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

Date Signed 3/7/13 Signature _____
(month, day, year)

**SCHEDULE D
 Income - Gifts**

Name
Daniel C. Holloway

▶ NAME OF SOURCE (Not an Acronym)
Industry Manufacturing Council

ADDRESS (Business Address Acceptable)
15651 Staford St., Industry, CA 91744

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Chamber of Commerce

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 16 / 12	\$ 200.00	Rotary Funraiser Golf
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Frank Tripepi/Willdan Services

ADDRESS (Business Address Acceptable) *Suite 405*
13191 Crossroads Pkwy. North, Industry, CA 91746

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Engineering

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 10 / 12	\$ 66.00	Concert ticket for self
03 / 10 / 12	\$ 66.00	Concert ticket for wife
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Charlie Kinakis/Alert Insulation

ADDRESS (Business Address Acceptable)
15913 Old Valley Rd, La Puente, CA 91744

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insulation Contractor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 06 / 12	\$ 13.00	Lunch
04 / 18 / 12	\$ 50.00	School Dinner for Self
04 / 18 / 12	\$ 50.00	School Dinner for Wife

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE (Not an Acronym)
Charlie Kinakis/Alert Insulation (continued)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 02 / 12	\$ 10.00	Lunch
12 / 10 / 12	\$ 12.00	Lunch
___ / ___ / ___	\$ _____	_____

Comments: _____