



STATEMENT OF ECONOMIC INTERESTS

Date Received Office Use Only

COVER PAGE

RECEIVED CITY OF NORWALK CITY CLERK

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) Shryock Leonard 13 MAR 28 PA 49

1. Office, Agency, or Court

Agency Name City of Norwalk Division, Board, Department, District, if applicable Administration Your Position City Council

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

Agency: Position:

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

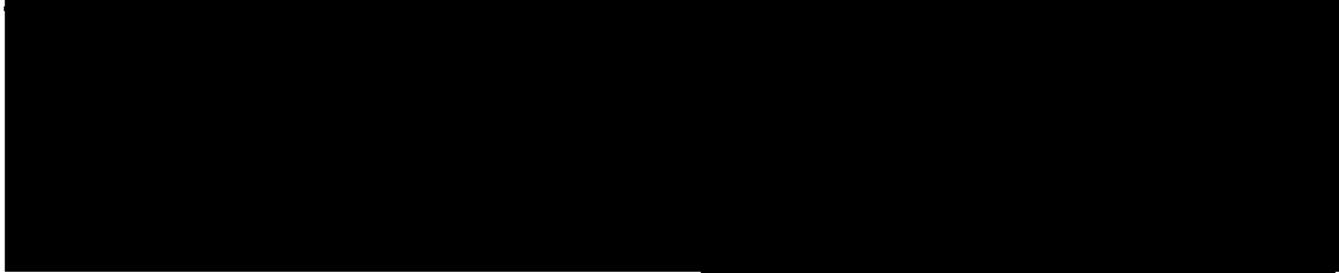
State Multi-County City of Norwalk Judge or Court Commissioner (Statewide Jurisdiction) County of Other

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

Annual: The period covered is January 1, 2012, through December 31, 2012. Leaving Office: Date Left (Check one) The period covered is January 1, 2012, through the date of leaving office. Assuming Office: Date assumed 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 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

Date Signed March 28, 2013 (month, day, year) Signature

**SCHEDULE D
 Income - Gifts**

Name
Leonard Shroyck

▶ NAME OF SOURCE (Not an Acronym)
Consolidated Disposal/Republic Services
 ADDRESS (Business Address Acceptable)
12949 Telegraph Rd
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Santa Fe Springs, Ca. 90670

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5/18/12</u>	<u>150</u>	<u>GOLF Green Fee</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

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

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___/___/___	\$ _____	_____
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___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: _____