

**STATEMENT OF ECONOMIC INTERESTS**  
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COVER PAGE COMMISSION



2013 APR -2 AM 11:49

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Tercero Brent A.

**1. Office, Agency, or Court**

Agency Name  
City of Pico Rivera  
Division, Board, Department, District, if applicable  
Your Position  
Mayor Pro Tem

► 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 Pico Rivera
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of Los Angeles
- 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)
- Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- 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: 3

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

-or-  
 **None - No reportable interests on any schedule**



herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State

Date Signed 03/28/2013  
(month, day, year)

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

▶ NAME OF SOURCE (Not an Acronym)  
California League of Cities Latino Caucus  
 ADDRESS (Business Address Acceptable)  
770 L St., Suite 1030, Sacramento CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Nonprofit Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01/13/12	\$ 45	Lunch
01/13/12	\$ 46	Dinner
01/14/12	\$ 30	Breakfast

▶ NAME OF SOURCE (Not an Acronym)  
California League of Cities Latino Caucus  
 ADDRESS (Business Address Acceptable)  
770 L St., Suite 1030, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Nonprofit Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01/14/12	\$ 40	Lunch
01/14/12	\$ 131	Dinner
04/15/12	\$ 20	Reception

▶ NAME OF SOURCE (Not an Acronym)  
Baraka  
 ADDRESS (Business Address Acceptable)  
1721 Wright Ave., La Verne, CA 91750  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Outdoors Equipment Sales

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04/15/12	\$ 65	Binoculars won in raffle
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
California League of Cities Latino Caucus  
 ADDRESS (Business Address Acceptable)  
770 L St., Suite 1030, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Nonprofit Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/28/12	\$ 20	Lunch
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
Alvarez Glassman and Associates  
 ADDRESS (Business Address Acceptable)  
13181 Crossroads Pkwy, City of Industry, CA 91746  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Attorney

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01/18/12	\$ 50	Dinner
01/19/12	\$ 65	Dinner
09/06/12	\$ 50	Dinner

▶ NAME OF SOURCE (Not an Acronym)  
Young Elected Officials Network  
 ADDRESS (Business Address Acceptable)  
1550 Melvin St., Tallahassee, FL 32301  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/09/12	\$ 583.5	Lodging for 3 nights
12/07/12	\$ 25	Breakfast
12/07/12	\$ 35	Lunch

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

**SCHEDULE D  
 Income - Gifts**

Name \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)

Young Elected Officials Network  
 ADDRESS (Business Address Acceptable)

1550 Melvin St., Tallahassee, FL 32301  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/08/12</u>	<u>\$ 25</u>	<u>Breakfast</u>
<u>12/08/12</u>	<u>\$ 35</u>	<u>Lunch</u>
<u>12/08/12</u>	<u>\$ 50</u>	<u>Dinner</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)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

Young Elected Officials Network  
 ADDRESS (Business Address Acceptable)

1550 Melvin St., Tallahassee, FL 32301  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/09/12</u>	<u>\$ 25</u>	<u>Breakfast</u>
<u>12/09/12</u>	<u>\$ 35</u>	<u>Lunch</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)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

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