



STATEMENT OF ECONOMIC INTERESTS
 FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

Date Received
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Please type or print in ink.

2013 MAR 21 AM 10:58

NAME OF FILER (LAST) Brewer (FIRST) Thomas (MIDDLE) _____
 CITY OF TORRANCE
 CLERK'S OFFICE

1. Office, Agency, or Court

Agency Name
City of Torrance
 Division, Board, Department, District, if applicable _____ Your Position
Council Member

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

Agency: Municipal Area Express (MAX) Position: Board Member

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

- State
- Multi-County _____
- City of Torrance
- 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 ____/____/____
- Candidate:** Election year _____ and office sought, if different than Part 1: _____
- 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.

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**

5.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete.

Date Signed 03/18/2013
 (month, day, year)

SCHEDULE D Income – Gifts

Name
Thomas Brewer

▶ NAME OF SOURCE *(Not an Acronym)*
Rancho Bernardo Inn

ADDRESS *(Business Address Acceptable)*
17550 Bernardo Oaks Dr. San Diego, CA 92128

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Hotel

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 07 / 12	\$ 400.00	Hotel stay
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Southern California Edison

ADDRESS *(Business Address Acceptable)*
505 Maple Ave. Torrance, CA 90503

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Utility Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 05 / 12	\$ 50.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Southern California Gas Company

ADDRESS *(Business Address Acceptable)*
P.O. Box 3150 San Dimas, CA 91773

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Utility Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 05 / 12	\$ 50.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Comments: _____