

2012 AN

STATEMENT OF ECONOMIC INTERESTS

Date Received  
Official Use Only



COUNTY OF SAN DIEGO  
BOARD OF SUPERVISORS

Please type or print in ink.

NAME OF FILER (LAST) COX (FIRST) GREG (MIDDLE) RICHARDSON  
2012 FEB 19 AM 9:20  
2013 FEB 19 AM 9 24

1. Office, Agency, or Court

Agency Name: COUNTY OF SAN DIEGO  
Division, Board, Department, District, if applicable: BOARD OF SUPERVISORS  
Your Position: COUNTY SUPERVISOR

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

Agency: See attached Position:

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

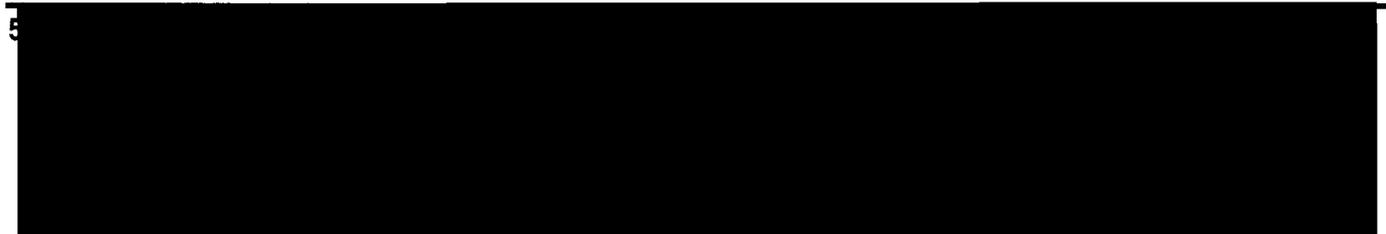
- State  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County  County of SAN DIEGO
- City of  Other

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
- Assuming Office: Date assumed 01 / 07 / 2013
- 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: 14
- Schedule A-1 - 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
- None - No reportable interests on any schedule



herein and in any attached schedules is true and complete. I acknowledge and certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 02/05/2013  
(month, day, year)

**2012 Form 700 – Cover Sheet Attachment**

- ✓ **San Diego Association of Governments (SANDAG):**
  - SANDAG Board – Board Member
  - Executive Committee – Board Member
  - Bayshore Bikeway – Board Member
  - Borders Committee – Board Member
  - Public Safety Committee – Alternate Board member
  - Transportation Committee – Alternate Board Member
  
- ✓ **San Diego County Regional Airport Authority (SDCRAA)** – Board Member
  
- ✓ **San Diego Workforce Partnership** – Board Member
  
- ✓ **Metropolitan Transit System** – Alternate Board Member
  
- ✓ **Local Agency Formation Commission** – Alternate Board Member

# 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

Name

Greg Cox

▶ NAME OF BUSINESS ENTITY  
**Pepsico Incorporated**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Beverage, Restaurant & Snack Foods**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Nabors Industries, Ltd.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Oil Drilling**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA / SEP Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      11/23/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Chico's FAS, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Women's Clothing**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA / SEP Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      11/23/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Medtronics, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Cardiac Pacemaker Manufacturer**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Wedbush Securities, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Spouse's IRA / SEP Investment**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA / SEP Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**EMC Corp. Mass**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Computer Manufacturer**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
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.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Greg Cox

▶ NAME OF BUSINESS ENTITY  
**Fedex Corporation**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Air Express**

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 **IRA Roth Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Home Depot, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Building Material & Home Improvement Sales**

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 **Spouse's IRA Roth Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Johnson and Johnson Common**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Health Care Products**

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 **Spouse's IRA / SEP Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Qualcomm, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Mobile Communications**

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 **Spouse's IRA Roth Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Hewlett-Packard Company**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Computers & Printers**

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 **Spouse's IRA / SEP Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      06 / 12 / 12  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Covance, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Health Care 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 **IRA Roth Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
    Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
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.

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Greg Cox

▶ NAME OF BUSINESS ENTITY  
**Mattel, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Toy Manufacturer**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Joint Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
                                  Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Coach, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Apparel, Accessories and Luxury Goods**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA / SEP Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
                                  Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Seacoast Commerce Bank**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Community Bank**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Joint Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
                                  Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Calumet Specialty Products Partners**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Hydrocarbon Products**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA / SEP Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
                                  Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Alcoa, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Aluminum Manufacturing**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Joint Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
                                  Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Pan American Silver, Corp.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Silver Mining**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
                                  Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
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.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Greg Cox

▶ NAME OF BUSINESS ENTITY  
**Wedbush Securities, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**IRA Roth Investment**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Motorola Solutions, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Consumer Electronics**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Exelon Corp.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Utility Services Holding Company**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Depomed, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Pharmaceutical Products**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA / SEP Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      11/23/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**BP Prudhoe Bay Royalty Trust**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Oil Income**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA / SEP Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/12      08/16/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**BP Prudhoe Bay Royalty Trust**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Oil Income**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA / SEP Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 11/28/12      \_\_\_\_\_/\_\_\_\_\_/12  
 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.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Greg Cox

▶ NAME OF BUSINESS ENTITY  
**American Electric Power Company, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Electric Utility**

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 **Spouse's IRA / SEP Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**BP Prudhoe Bay Royalty Trust**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Oil Income**

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 **Joint Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      08/16/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Calumet Specialty Products Partners**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Hydrocarbon Products**

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 **Joint Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**BP Prudhoe Bay Royalty Trust**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Oil Income**

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 **IRA Roth Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      08/16/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**Motorola Mobility Holdings, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Communications Hardware**

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 **IRA Roth Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      05/22/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**BGC Partners, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Securities Brokerage**

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 **IRA Roth Account**  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
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

Greg Cox

NAME OF BUSINESS ENTITY  
**Manitowoc Company, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Construction Equipment**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
05 / 23 / 12           /      / 12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**Seadrill Ltd.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Oil Exploration Equipment**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
08 / 22 / 12           /      / 12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**Seadrill Ltd.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Oil Exploration Equipment**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Joint Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
08 / 22 / 12           /      / 12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**Manitowoc Company, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Construction Equipment**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
08 / 22 / 12           /      / 12  
 ACQUIRED      DISPOSED

NAME OF BUSINESS ENTITY  
**Wedbush Securities, Inc.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Spouse's IRA Roth Investment**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT **Spouse's IRA Roth Account**  
 Stock       Other (Describe)  
 Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
12 / 21 / 12           /      / 12  
 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:  
     /      / 12           /      / 12  
 ACQUIRED      DISPOSED

Comments:



**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
Greg Cox

1. INCOME RECEIVED	1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>Escape for All Seasons Rentals</u>	NAME OF SOURCE OF INCOME _____
ADDRESS (Business Address Acceptable) <u>P.O. Box 208, Big Bear Lake, CA 92135</u>	ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Property Management / rental of Big Bear Condo</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE _____
YOUR BUSINESS POSITION _____	YOUR BUSINESS POSITION _____
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input checked="" type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>

**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* <u>Seacoast Commerce Bank</u>	INTEREST RATE <u>Variable</u> % <input type="checkbox"/> None	TERM (Months/Years) <u>10 years</u>
ADDRESS (Business Address Acceptable) <u>296 H Street, Chula Vista, CA</u>	SECURITY FOR LOAN <input type="checkbox"/> None <input checked="" type="checkbox"/> Personal residence <input checked="" type="checkbox"/> Real Property <u>647 Windsor Circle</u> <small>Street address</small> <u>Chula Vista, CA 91910</u> <small>City</small>	
BUSINESS ACTIVITY, IF ANY, OF LENDER <u>Commercial Bank</u>	<input type="checkbox"/> Guarantor _____	
HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	<input checked="" type="checkbox"/> Other <u>Home Equity Line of Credit</u> <small>(Describe)</small>	

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

Name

GREG COX

**SCHEDULE D  
Income – Gifts**

▶ NAME OF SOURCE  
**Building Industry Association**

ADDRESS (Business Address Acceptable)  
**9201 Spectrum Ctr Blvd., #110, San Diego, 92123**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Construction**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 21 / 12	\$ 150.00	BIA Installation dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE  
**Associated General Contractors**

ADDRESS (Business Address Acceptable)  
**6212 Ferris Square, San Diego, CA 92121**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Construction**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 24 / 12	\$ 92.19	Installation Dinner
___ / ___ / ___	\$ _____	awards gala
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE  
**Paul Robinson**

ADDRESS (Business Address Acceptable)  
**600 West Broadway, 8th floor, San Diego, 92101**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Attorney**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 25 / 12	\$ 75.00	Downtown Partnership
___ / ___ / ___	\$ _____	Installation
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE  
**Sycuan Band of Kumeyaay Nation**

ADDRESS (Business Address Acceptable)  
**5459 Sycuan Road, El Cajon 92019**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 05 / 12	\$ 200	Padres Opening Day
___ / ___ / ___	\$ _____	two tickets
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE  
**North Island Credit Union**

ADDRESS (Business Address Acceptable)  
**5898 Copley Drive, San Diego 92111**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**financial institution**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 02 / 12	\$ 100	SD Air & Space Gala
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE  
**Financial Marketing Concepts**

ADDRESS (Business Address Acceptable)  
**100 Executive Way, Ponte Vedra Beach, FL 32082**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Finance**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 22 / 12	\$ 83	ticket to Padres game
06 / 19 / 12	\$ 180	ticket to Padres game
___ / ___ / ___	\$ _____	_____

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

**SCHEDULE D**  
**Income – Gifts**

Name  
**Greg Cox**

▶ NAME OF SOURCE *(Not an Acronym)*  
**General Dynamics NASSCO**

ADDRESS *(Business Address Acceptable)*  
**2798 Harbor Drive, San Diego 92113**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**shipbuilding**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 05 / 12	\$ 149	Christening/launch of USNS Cesar Chavez
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*  
**San Diego Regional Economic Development Corp.**

ADDRESS *(Business Address Acceptable)*  
**530 "B" Street, 7th Floor, San Diego 92101**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Economic Development**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 23 / 12	\$ 85	Annual Dinner
10 / 23 / 12	\$ 35	Luncheon
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*  
**Charles Company**

ADDRESS *(Business Address Acceptable)*  
**9034 West Sunset Blvd., West Hollywood 90069**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Real Estate / Investment**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 19 / 12	\$ 65	Annual Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*  
**Bennet Greenwald, Greenwald Company**

ADDRESS *(Business Address Acceptable)*  
**2929 Canon Street, Suite A, San Diego**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 04 / 12	\$ 69	Pt. Loma Assoc Dinner (2 tix)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*  
**Bridgepoint**

ADDRESS *(Business Address Acceptable)*  
**13500 Evening Creek Drive, Suite 600, 92128**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Education**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 27 / 12	\$ 100	Holiday Bowl tailgate (2 tix)
___ / ___ / ___	\$ _____	_____
12 / 27 / 12	\$ 200	Holiday Bowl (2 tix)

▶ NAME OF SOURCE *(Not an Acronym)*  
**Lincoln Club of San Diego County**

ADDRESS *(Business Address Acceptable)*  
**P.O. Box 12664, La Jolla 92039**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 06 / 12	\$ 121	Annual Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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

**SCHEDULE D**  
**Income – Gifts**

Name  
**Greg Cox**

▶ NAME OF SOURCE *(Not an Acronym)*  
**Leonard Okun - US Health Works**

ADDRESS *(Business Address Acceptable)*  
**5575 Ruffin Rd, San Diego, CA 92123**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Health care**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 04 / 12	\$ 75	Gift Basket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*  
**Rancho Santa Fe Association**

ADDRESS *(Business Address Acceptable)*  
**Box A, Rancho Santa Fe**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Homeowners Association**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 10 / 12	\$ 75	Gift Basket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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

▶ 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: \_\_\_\_\_

**SCHEDULE E  
Income – Gifts  
Travel Payments, Advances,  
and Reimbursements**

Name  
Greg Cox

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)  
California State Association of Counties

ADDRESS (Business Address Acceptable)  
1100 K Street, Suite 101

CITY AND STATE  
Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Advocacy for Counties and their residents

DATE(S): 01 / 01 / 12 - 12 / 31 / 12 AMT: \$ 1,164.19  
*(If gift)*

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description  
travel / lodging expenses for meetings - National Association of Counties

▶ NAME OF SOURCE (Not an Acronym)  
CSAC Finance Corporation

ADDRESS (Business Address Acceptable)  
1100 K Street

CITY AND STATE  
Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Financial Services for Counties

DATE(S): 01 / 01 / 12 - 12 / 31 / 12 AMT: \$ 1,093.02  
*(If gift)*

TYPE OF PAYMENT: (must check one)  Gift  Income.

Made a Speech/Participated in a Panel  
 Other - Provide Description  
travel / lodging expenses for meetings (Board of Directors)

▶ NAME OF SOURCE (Not an Acronym)  
Institute for Local Government

ADDRESS (Business Address Acceptable)  
1400 K Street, Suite 301

CITY AND STATE  
Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Local Government Advocacy

DATE(S): 01 / 01 / 12 - 12 / 31 / 12 AMT: \$ 521.12  
*(If gift)*

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description  
travel / lodging / meals / expenses for meetings (Board of Directors)

▶ NAME OF SOURCE (Not an Acronym)  
League of California Cities

ADDRESS (Business Address Acceptable)  
1400 K Street

CITY AND STATE  
Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Advocacy for cities and their residents

DATE(S): 09 / 05 / 12 - / / AMT: \$ 54.11  
*(If gift)*

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description  
meal prior to presenting the past president's award at annual conference

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

**SCHEDULE E:  
 Income - Gifts  
 Travel Payments, Advances,  
 and Reimbursements**

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)  
League of California Cities

ADDRESS (Business Address Acceptable)  
1400 K Street

CITY AND STATE  
Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Advocacy for cities and their residents

DATE(S): 09 / 05 / 12 -      /      /      AMT: \$ 54.11  
 (If gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description  
meal for spouse - past presidents' award luncheon

▶ NAME OF SOURCE (Not an Acronym)  
CSAC Finance Corporation

ADDRESS (Business Address Acceptable)  
1100 K Street

CITY AND STATE  
Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Advocacy for Counties and their residents

DATE(S): 01 / 01 / 12 - 12 / 31 / 12 AMT: \$ 209.30  
 (If gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description  
Gift

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)

DATE(S):      /      /      -      /      /      AMT: \$       
 (If gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)

DATE(S):      /      /      -      /      /      AMT: \$       
 (If gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description

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