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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Lowenthal	Bonnie	Adler

1. Office, Agency, or Court

Agency Name
CA State Assembly

Division, Board, Department, District, if applicable: District 70

Your Position: Assemblymember

► 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 _____
- ☐ 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:* 14

- ☑ **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 acknowledge this i

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

Date Signed 2-26-13
(month, day, year)

Signat

FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

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
Bonnie Lowenthal

► NAME OF BUSINESS ENTITY
CLEARBRIDGE ENERGY MLP FD INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Energy

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 Unit Trust (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
DENTSPLY INTERNATIONAL INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Health Care

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

► NAME OF BUSINESS ENTITY
HAWAIIAN ELECTRIC IND

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
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 (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
MAGELLAN MIDSTREAM PARTNERS LP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Oil Pipeline

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

► NAME OF BUSINESS ENTITY
US ECOLOGY INC NEW

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Enviromental

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

► NAME OF BUSINESS ENTITY
VARIAN MEDICAL SYS INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Healthcare

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 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
Bonnie Lowenthal

► NAME OF BUSINESS ENTITY
JP Morgan Chase Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial

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 Corporate Bond (Describe)
☐ Partnership ○ Income Received of $0 - $499
○ Income Received of $500 or More (Report on Schedule C)

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

► NAME OF BUSINESS ENTITY
Federal National Mtg Assn Debs

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial

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 Other-Bond (Describe)
☐ Partnership ○ Income Received of $0 - $499
○ Income Received of $500 or More (Report on Schedule C)

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

► NAME OF BUSINESS ENTITY
FHLMC MTN 1750 19MY30

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial

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 Other-Bond (Describe)
☐ Partnership ○ Income Received of $0 - $499
○ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
06/05/12 ACQUIRED __/__/12 DISPOSED

► NAME OF BUSINESS ENTITY
UNILEVER PLC (NEW) ADS

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Consumer Staple

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 ACQUIRED __/__/12 DISPOSED

► NAME OF BUSINESS ENTITY
HOME DEPOT INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
consumer Discretionary

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 ACQUIRED __/__/12 DISPOSED

► NAME OF BUSINESS ENTITY
CHEVRON CORP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Energy

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 ACQUIRED __/__/12 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
Bonnie Lowenthal

► NAME OF BUSINESS ENTITY
HONEYWELL INTERNATIONAL INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Business Equipment

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

► NAME OF BUSINESS ENTITY
JOHNSON & JOHNSON

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Healthcare

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

► NAME OF BUSINESS ENTITY
NOVARTIS AG ADR

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Healthcare

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

► NAME OF BUSINESS ENTITY
AT&T INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Telecommunications

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

► NAME OF BUSINESS ENTITY
JPMORGAN CHASE & CO

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial

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

► NAME OF BUSINESS ENTITY
ALLIED WORLD ASSUR CO HLDG LTD

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial

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 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
Bonnie Lowenthal

► NAME OF BUSINESS ENTITY
APPLIED MATERIALS INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Electronics

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

► NAME OF BUSINESS ENTITY
VODAFONE GP PLC ADS NEW

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Telecommunications

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

► NAME OF BUSINESS ENTITY
HALLIBURTON CO

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Energy

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

► NAME OF BUSINESS ENTITY
CHUBB CORP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial

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

► NAME OF BUSINESS ENTITY
MICROSOFT

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Technology

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 04 / 13 / 12
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
LEGACY RESERVES LP UTS REP LP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Energy

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 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
Bonnie Lowenthal

► NAME OF BUSINESS ENTITY
MANNKINO CORP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Healthcare

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

► 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

► 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

► 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

► 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

► 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: _____

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Bonnie Lowenthal

SCHEDULE B
Interests in Real Property
(Including Rental Income)

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
711 Cedar Avenue

CITY
Long Beach, CA 90813

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

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

NATURE OF INTEREST
- ☑ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold ____ Yrs. remaining
- ☐ ____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☑ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
☐ None

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

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

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

NATURE OF INTEREST
- ☐ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold ____ Yrs. remaining
- ☐ ____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
☐ None

* You are not required to report loans from commercial lending institutions 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

INTEREST RATE ____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (*Business Address Acceptable*)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE ____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

☐ Guarantor, if applicable

Comments: ____

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Bonnie Lowenthal

SCHEDULE D
Income – Gifts

► NAME OF SOURCE (Not an Acronym)
FedEx Corporation
ADDRESS (Business Address Acceptable)
1201 K Street, Suite 727, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Mail service

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 12 / 12	$ 39	Dinner
11 / 14 / 12	$ 24	Dinner
/ /	$	

► NAME OF SOURCE (Not an Acronym)
CA Correctional Peace Officers Association
ADDRESS (Business Address Acceptable)
755 Riverpoint Drive, West Sacramento, CA 95605
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Civic organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 15 / 12	$ 222	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Legal Aid Foundation of Los Angeles
ADDRESS (Business Address Acceptable)
601 Pacific Ave., Long Beach, CA 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legal assistance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 18 / 12	$ 140	Tickets to wine event
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
United Airlines
ADDRESS (Business Address Acceptable)
7300 World Way West, Los Angeles, CA 90045
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Air Transportation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 08 / 12	$ 200	VIP Reception
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Boys and Girls Club of LA Harbor
ADDRESS (Business Address Acceptable)
1200 S. Cabrillo Ave., San Pedro, CA 90731
BUSINESS ACTIVITY, IF ANY, OF SOURCE
501(c)3

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 11 / 12	$ 150	ILWU/PMA Luncheon
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Los Angeles Superior Court
ADDRESS (Business Address Acceptable)
111 N. Hill Street, Los Angeles, CA 90012
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 03 / 12	$ 50	Reception
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Bonnie Lowenthal

SCHEDULE D
Income – Gifts

► NAME OF SOURCE (Not an Acronym)
Dignity Health St. Mary Medical Center
ADDRESS (Business Address Acceptable)
1050 Linden Ave., Long Beach, CA 90813
BUSINESS ACTIVITY, IF ANY, OF SOURCE
501(c)3

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 26 / 12	$ 150	Tickets to kick-off party
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Christian Outreach Action
ADDRESS (Business Address Acceptable)
575 East 3rd Street, Long Beach, CA 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Religious organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 28 / 12	$ 140	Silent Auction/Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Keesal, Young and Logan
ADDRESS (Business Address Acceptable)
400 Oceangate, PO Box 1730, Long Beach, 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 15 / 12	$ 148	Grand Prix Brunch
12 / 07 / 12	$ 54	Holiday Party
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Global Automakers
ADDRESS (Business Address Acceptable)
1050 K Street, NW,Suite 850, Washington, DC 20001
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Manufacturing

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 21 / 12	$ 105	Dinner
11 / 28 / 12	$ 12	Auto Show Tour
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Mobility 21
ADDRESS (Business Address Acceptable)
One Park Plaza, S. 600, PMB 183, Irvine, CA 92614
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transportation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 28 / 12	$ 225	Ticket to Summit
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
California Agricultural Aircraft Association
ADDRESS (Business Address Acceptable)
1404B Flightline Drive, Lincoln, CA 95648
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transportation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 29 / 12	$ 234	Dinner
02 / 29 / 12	$ 5	Reusable bag
/ /	$	

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

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SCHEDULE D
Income – Gifts

► NAME OF SOURCE (Not an Acronym)
International City Theatre
ADDRESS (Business Address Acceptable)
110 Pine Avenue, Suite 820, Long Beach, CA 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Theatre Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 27 / 12	$ 175	Gala and Dinner
09 / 29 / 12	$ 75	Dinner
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Toyota Motor North America
ADDRESS (Business Address Acceptable)
411 East Wisconsin Ave., Milwaukee, WI 53202
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Auto Manufacturer

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 26 / 12	$ 94	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Consumer Attorneys Association of Los Angeles
ADDRESS (Business Address Acceptable)
800 West 6th Street, Suite 700, Los Angeles 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 21 / 12	$ 150	Dinner
04 / 30 / 12	$ 21	Meals-Spataro
05 / 01 / 12	$ 13	Reception

► NAME OF SOURCE (Not an Acronym)
California Manufacturers and Technology
ADDRESS (Business Address Acceptable)
1115 11th Street, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Manufacturers

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 23 / 12	$ 143	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
California Cable and Telecommunications Assn.
ADDRESS (Business Address Acceptable)
1001 K Street, 2nd Floor, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Telecommunications

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 11 / 12	$ 39	Lunch
04 / 30 / 12	$ 32	Reception
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Consumer Attorneys of California
ADDRESS (Business Address Acceptable)
770 L Street, Suite 1200, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 30 / 12	$ 21	Reception
05 / 01 / 12	$ 13	Reception
/ /	$	

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Bonnie Lowenthal

SCHEDULE D
Income – Gifts

► NAME OF SOURCE (Not an Acronym)
John A. Perez for Assembly 2012
ADDRESS (Business Address Acceptable)
777 S. Figueroa #450, Los Angeles, CA 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 04 / 12	$ 39	Engraved box
08 / 27 / 12	$ 74	Ferewell Dinner
12 / 02 / 12	$ 88	Personelized bowl

► NAME OF SOURCE (Not an Acronym)
John A. Perez for Assembly 2012
ADDRESS (Business Address Acceptable)
777 S. Figueroa #450, Los Angeles, CA 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 02 / 12	$ 49	Welcome Reception
09 / 03 / 12	$ 27	Dinner
/ /	$	

► NAME OF SOURCE (Not an Acronym)
California Democratic Party
ADDRESS (Business Address Acceptable)
1401 21st Street, Suite 200, Sacramento, CA 95811
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political Party

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 07 / 12	$ 135	Meals 2/7/12-2/8/12
11 / 08 / 12	$ 82	New Member Lunch
08 / 15 / 12	$ 39	Meal/breakfast

► NAME OF SOURCE (Not an Acronym)
Edison International and Affiliates
ADDRESS (Business Address Acceptable)
2244 Walnut Grove Ave., Rosemead, CA 91770
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Utility Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 19 / 12	$ 32	Meal and beverage
08 / 16 / 12	$ 65	Dinner
07 / 18 / 12	$ 60	Dinner

► NAME OF SOURCE (Not an Acronym)
Edison International and Affiliates
ADDRESS (Business Address Acceptable)
2244 Walnut Grove Ave., Rosemead, CA 91770
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Utility Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 13 / 12	$ 19	Meal and beverages
07 / 06 / 12	$ 15	Cambodian Dinner
/ /	$	

► NAME OF SOURCE (Not an Acronym)
CA Judges Association
ADDRESS (Business Address Acceptable)
89 Kearny Street, Ste. 1850, San Francisco, 94108
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Judicial

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 18 / 12	$ 67	Reception
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Bonnie Lowenthal

SCHEDULE D
Income – Gifts

► NAME OF SOURCE (Not an Acronym)
Association for Los Angeles Deputy Sheriffs
ADDRESS (Business Address Acceptable)
2 Cupanie Circle, Monterey Park, CA 91755
BUSINESS ACTIVITY, IF ANY, OF SOURCE
501(c)3

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 02 / 12	$ 82	Tickets to banquet
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
AFSCME Local 3634
ADDRESS (Business Address Acceptable)
514 Shetto Pl., Suite 208, Los Angeles, CA 90020
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Union

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 14 / 12	$ 70	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Pacifica Institute
ADDRESS (Business Address Acceptable)
4700 Ramona Blvd., Monterey Park, CA 91754
BUSINESS ACTIVITY, IF ANY, OF SOURCE
501(c)3

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 01 / 12	$ 78	Dinner
11 / 22 / 12	$ 180	Decorative Trinkets
/ /	$	

► NAME OF SOURCE (Not an Acronym)
SEIU United Long Term Care Workers
ADDRESS (Business Address Acceptable)
2910 Beverly Blvd., Los Angeles, CA 90057
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Union

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 22 / 12	$ 250	Brunch
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Port of Los Angeles
ADDRESS (Business Address Acceptable)
425 S. Palos Verdes Street, San Pedro, CA 90731
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Import/export/goods movement

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 14 / 12	$ 82	Lobster Fest 9/14-9/16
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Port of Long Beach
ADDRESS (Business Address Acceptable)
925 Harbor Plaza, Long Beach, CA 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Import/export/goods movement

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 21 / 12	$ 59	Dinner
/ /	$	
/ /	$	

Comments: _____

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Bonnie Lowenthal

SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
Lembde Legal
ADDRESS *(Business Address Acceptable)*
3325 Wilshire Blvd., S.1300, Los Angeles, CA 90010
BUSINESS ACTIVITY, IF ANY, OF SOURCE
501(c)3

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 16 / 12	$ 82.00	Brunch
/ /	$	
/ /	$	

► 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)
/ /	$	
/ /	$	
/ /	$	

► 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:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Bonnie Lowenthal

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)*
Pacifica Institute
ADDRESS *(Business Address Acceptable)*
1019 Gayley Avenue, Suite A
CITY AND STATE
Los Angeles, CA 90024
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☑ 501 (c)(3)

DATE(S): 11 / 19 / 12 - 11 / 27 / 12 *(If gift)* AMT: $ 1,500.00

TYPE OF PAYMENT: (must check one) ☑ Gift ☐ Income

☐ Made a Speech/Participated in a Panel
☑ Other - Provide Description
Turkey Study Trip sponsored by educational institution.

► NAME OF SOURCE *(Not an Acronym)*
City of Long Beach
ADDRESS *(Business Address Acceptable)*
333 West Ocean Blvd.
CITY AND STATE
Long Beach, CA 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)
Government

DATE(S): 10 / 10 / 12 - 10 / 12 / 12 *(If gift)* AMT: $ 3,169.04

TYPE OF PAYMENT: (must check one) ☑ Gift ☐ Income

☐ Made a Speech/Participated in a Panel
☑ Other - Provide Description
East Coast Port Tour and Briefings

► NAME OF SOURCE *(Not an Acronym)*
Independent Voter Project
ADDRESS *(Business Address Acceptable)*
101 West Broadway, Suite 1480
CITY AND STATE
San Diego, CA 92101
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)
501(c)4

DATE(S): 11 / 11 / 12 - 11 / 16 / 12 *(If gift)* AMT: $ 2,298.78

TYPE OF PAYMENT: (must check one) ☑ Gift ☐ Income

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

► NAME OF SOURCE *(Not an Acronym)*
City of Los Angeles
ADDRESS *(Business Address Acceptable)*
1400 K Street, Suite 208
CITY AND STATE
Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)
Government

DATE(S): 01 / 01 / 12 - 12 / 31 / 12 *(If gift)* AMT: $ 380.00

TYPE OF PAYMENT: (must check one) ☑ Gift ☐ Income

☐ Made a Speech/Participated in a Panel
☑ Other - Provide Description
Airport Parking and Shuttle Service

Comments: