



STATEMENT OF ECONOMIC INTERESTS

MAR 01 2013 Date Received

COVER PAGE

BY: [Signature]

Please type or print in ink.

NAME OF FILER (LAST) Melenschain (FIRST) Brian (MIDDLE) K

1. Office, Agency, or Court

Agency Name: CA State Assembly
Division, Board, Department, District, if applicable: 77th District
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 (checked)
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. (checked)
-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: 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 (checked)
Schedule D - Income - Gifts - schedule attached (checked)
Schedule E - Income - Gifts - Travel Payments - schedule attached

-or- None - No reportable interests on any schedule

5. Verification

Home Address: [Redacted]

Date Signed 02/28/2013 (month, day, year)

Signature: [Redacted]

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

<b>CALIFORNIA FORM 700</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small> Name <b>Brian K Malenschain</b>
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▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <b>United Way of San Diego</b>	NAME OF SOURCE OF INCOME _____
ADDRESS (Business Address Acceptable) <b>4899 Murphy Canyon Rd, San Diego, CA 92123</b>	ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF SOURCE _____	BUSINESS ACTIVITY, IF ANY, OF SOURCE _____
YOUR BUSINESS POSITION <b>Commissioner of Plan to End Chronic Homelessness</b>	YOUR BUSINESS POSITION _____
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" 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 checked="" 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>	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 _____ ADDRESS (Business Address Acceptable) _____ BUSINESS ACTIVITY, IF ANY, OF LENDER _____ HIGHEST BALANCE DURING REPORTING PERIOD <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	INTEREST RATE _____% <input type="checkbox"/> None TERM (Months/Years) _____
SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small>Street address</small> _____ <small>City</small> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>	

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

**SCHEDULE D  
Income - Gifts**

<b>CALIFORNIA FORM 700</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small> Name <b>Brian K Malenschein</b>
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▶ **NAME OF SOURCE (Not an Acronym)**  
**Berona Band of Mission Indians**

ADDRESS (Business Address Acceptable)  
**1095 Berona Road, Lakeside, CA 92040**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Resort & Casino**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 17 / 12	\$ 94	Food/drink
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
**John A. Perez for Assembly 2012**

ADDRESS (Business Address Acceptable)  
**777 S. Figueroa #4050, Los Angeles, CA 90017**

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

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 15 / 12	\$ 23	Food/drink
12 / 02 / 12	\$ 86	Personalized bowl
___ / ___ / ___	\$ _____	_____

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

ADDRESS (Business Address Acceptable)  
**13500 Evening Creek Dr N #600, San Diego, 92126**

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

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 27 / 12	\$ 90	Football tickets/parking
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ **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: \_\_\_\_\_