ORIGINAL

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

TM

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NAME OF FILER (LAST) (FIRST) (MIDDLE)

Ting Philip

1. Office, Agency, or Court

Agency Name
California State Assembly

Division, Board, Department, District, if applicable

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)*

- [X] State
- [ ] Multi-County _____
- [ ] City of _____
- [ ] Judge or Court Commissioner (Statewide Jurisdiction)
- [ ] County of _____
- [ ] Other _____

3. Type of Statement *(Check at least one box)*

- [X] Annual: The period covered is January 1, 2012 through December 31, 2012
  -or-
  The period covered is ___/___/_____ through December 31, 2011.
- [ ] Assuming Office: Date assumed ___/___/_____
- [ ] Candidate: Election Year _____ Office sought, if different than Part 1: _____
- [ ] Leaving Office: Date Left ___/___/_____ *(Check one)*
  - ○ The period covered is January 1, 2011, 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
- [X] Schedule D - *Income – Gifts* – schedule attached
- [ ] Schedule E - *Income – Gifts – Travel Payments* – schedule attached

-or-

- [ ] None - *No reportable interests on any schedule*

5. Verification

[redacted]

Date Signed Jan 2, 2013 (month, day, year) Signat[redacted]

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Phil Ting

SCHEDULE D
Income – Gifts

► NAME OF SOURCE
AT&T, Inc.
ADDRESS (Business Address Acceptable)
1215 K Street, Suite 1800, Sacramento CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Telecommunications

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 27 / 12	$ 420.00	MLB Tickets
/ /	$	
/ /	$	

► NAME OF SOURCE
City & County of San Francisco, Rec & Park Dept.
ADDRESS (Business Address Acceptable)
501 Stanyan Street, San Francisco 94117
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 12 / 12	$ 420.00	Concert Tickets
/ /	$	
/ /	$	

► NAME OF SOURCE
State Farm - Asian American Agents
ADDRESS (Business Address Acceptable)
1875 S Grant St., San Mateo 94402
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 27 / 12	$ 99.00	Apple TV
/ /	$	
/ /	$	

► NAME OF SOURCE
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

► NAME OF SOURCE
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

► NAME OF SOURCE
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Comments: _____

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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Amendment

TM

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Ting	Philip	Y

1. Office, Agency, or Court

Agency Name
California State Assembly

Division, Board, Department, District, if applicable

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)*

- [x] State
- [ ] Multi-County _____
- [ ] City of _____
- [ ] Judge or Court Commissioner (Statewide Jurisdiction)
- [ ] County of _____
- [ ] Other _____

3. Type of Statement *(Check at least one box)*

- [x] **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
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- [ ] **Schedule B** - *Real Property* – schedule attached
- [ ] **Schedule C** - *Income, Loans, & Business Positions* – schedule attached
- [x] **Schedule D** - *Income – Gifts* – schedule attached
- [ ] **Schedule E** - *Income – Gifts – Travel Payments* – schedule attached

-or-

- [ ] **None** - *No reportable interests on any schedule*

5. Verification

MAILING ADDRESS (Business or Agency Address Recommended - Public Document) STREET	CITY	STATE	ZIP CODE
	Sacramento	CA	95814

DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS (OPTIONAL)
(916) 319-2019	

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

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

(d)(5)

Date Signed 02/25/2013 (month, day, year) **Signature** (filing official)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Phil Ting

SCHEDULE D
Income – Gifts

► NAME OF SOURCE (Not an Acronym)
AT&T, Inc.
ADDRESS (Business Address Acceptable)
1215 K Street, Suite 1800, Sacramento CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Telecommunications

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06/27/12	$ 420	MLB Tickets
/ /	$	
/ /	$	

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

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/08/12	$ 82	Dem New Mbr Lunch
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
State Farm - Asian American Agents
ADDRESS (Business Address Acceptable)
1875 S Grant St., San Mateo CA 94402
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07/27/12	$ 99	Apple TV
/ /	$	
/ /	$	

► NAME OF SOURCE (Not an Acronym)
Speaker of the Assembly, John A. Perez, Jr.
ADDRESS (Business Address Acceptable)
State Capitol, Room 219
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/14/12	$ 20	Breakfast - The Grange
12/02/12	$ 88	Personalized Bowl
12/02/12	$ 49	Welcome Reception

► NAME OF SOURCE (Not an Acronym)
City & County of San Francisco, Rec & Park Dept.
ADDRESS (Business Address Acceptable)
501 Stanyan Street, San Francisco CA 94117
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08/12/12	$ 420	Concert Tickets
/ /	$	
/ /	$	

► 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: