

AN 0073



STATEMENT OF ECONOMIC INTERESTS

LOS ANGELES CITY ETHICS COMMISSION



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APR 7 2014

Please type or print in ink.

NAME OF FILER (LAST) Blumenfield (FIRST) Robert (MIDDLE) CITY CLERK - ADJ. SVC.

2014 APR -1 PM 4:19

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City Council

Division, Board, Department, District, if applicable

District 3

Your Position

Councilmember

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: San Fernando Valley Council of Governements

Position: Boardmember

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

- State
Multi-County
City of Los Angeles

- 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, 2013, through December 31, 2013.
-or- The period covered is 07 / 01 / 2013, through December 31, 2013.

- Leaving Office: Date Left
The period covered is January 1, 2013, through the date of leaving office.
The period covered is through the date of leaving office.

Assuming Office: Date assumed 07 / 01 / 2013

Candidate: Election year and office sought, if different than Part 1:

4. Schedule Summary

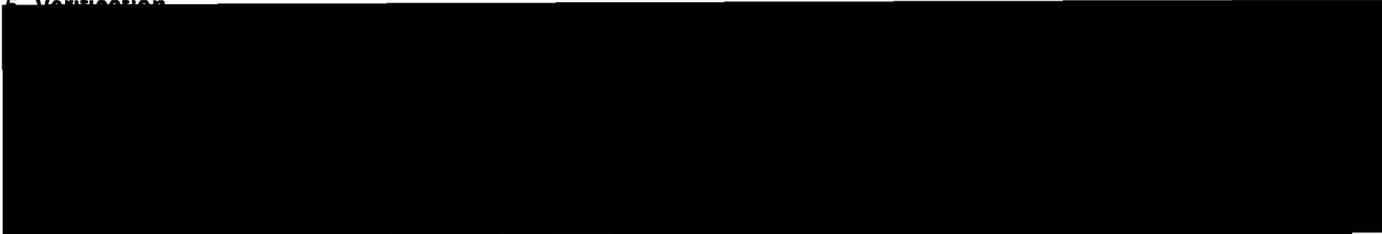
Check applicable schedules or "None."

Total number of pages including this cover page: 5

- 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. Verification



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

Date Signed 4/1/14 (month, day, year)





**SCHEDULE D**  
**Income - Gifts**

Name  
**Robert J. Blumenfield**

▶ NAME OF SOURCE (Not an Acronym)  
**Mayor Taron Margaryan**

ADDRESS (Business Address Acceptable)  
**Akeeshdee Street #1, Yerevan, Armenia 0015**

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

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 19 / 13	\$ 94.99	Bottle of Ararat Brandy
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**The Honorable Hovik Abrahamyan**

ADDRESS (Business Address Acceptable)  
**19 Baghramyan, Yerevan, 0095**

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

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 19 / 13	\$ 75.00	watch
09 / 19 / 13	\$ 30.00	Bottle of Cognac
09 / 19 / 13	\$ 50.00	Book

▶ NAME OF SOURCE (Not an Acronym)  
**West Valley Police Department**

ADDRESS (Business Address Acceptable)  
**19020 Vanowen Street**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Reseda, CA 91335**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 11 / 13	\$ 50.00	Bomber Jacket
___ / ___ / ___	\$ _____	(police appreciation
___ / ___ / ___	\$ _____	day)

▶ NAME OF SOURCE (Not an Acronym)  
**The Honorable Curren Price**

ADDRESS (Business Address Acceptable)  
**200 N. Spring Street, Room 420**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Los Angeles, CA 90012**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 20 / 13	\$ 50.00	picture frame
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**The Hon. Bako Sahakyan, President**

ADDRESS (Business Address Acceptable)  
**20 February Bldg, 3, Stepanakert,**

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

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 19 / 13	\$ 49.00	medalion
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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**

- 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)  
 Consulate General of the Republic of Armenia

ADDRESS (Business Address Acceptable)  
 346 N. Central Ave

CITY AND STATE  
 Glendale, CA 91203

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

DATE(S): 09 / 18 / 13 - 09 / 25 / 13 AMT: \$ 7,573.00  
(if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide Description  
 meals and trip provided during delegation visit to  
 Armenia

▶ 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

▶ 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: