



MAR 31 2014
COVER PAGE

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Please type or print in ink.

NAME OF FILER (LAST) CITY OF ALISO VIEJO (FIRST) CITY OF ALISO VIEJO (MIDDLE)
Chun Ross

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Aliso Viejo
Division, Board, Department, District, if applicable
City Council
Your Position
Council Member
If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: _____ Position: _____

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
14 APR - 7 AM 8:59

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

State Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of Aliso Viejo 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 _____, through December 31, 2013.
 Assuming Office: Date assumed _____
 Leaving Office: Date Left _____ (Check one)
 The period covered is January 1, 2013, 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: 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
 Schedule D - Income - Gifts - schedule attached
 Schedule E - Income - Gifts - Travel Payments - schedule attached
-or-
 None - No reportable interests on any schedule

5. [Redacted Signature Area]

I have used all reasonable diligence in preparing this statement. The information herein and in any attached schedules is true and complete. I acknowledge that I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/30/14
(month, day, year)

SCHEDULE D
Income – Gifts

Name
Ross Chun

▶ NAME OF SOURCE (Not an Acronym)
South Orange County Regional Chamber
 ADDRESS (Business Address Acceptable)
27758 Santa Margarita Pkwy 378
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Mission Viejo, CA 92691

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11/4/13</u>	<u>\$ 100</u>	<u>Golf Tournament</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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)
League of California Cities
 ADDRESS (Business Address Acceptable)
1400 K Street, Suite 400
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Sacramento, CA 95814

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/18/13</u>	<u>\$ 28.31</u>	<u>Meal</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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: _____