

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE



Date Received
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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Fellhauer Marie Caron

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of El Segundo

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: Please refer to attached listing

Position:

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FAIR POLITICAL PRACTICES COMMISSION
2014 APR -7 AM 9:50

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

- State
- Multi-County _____
- City of El Segundo
- 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 _____ through December 31, 2013.
- 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, 2013, 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: 4

- 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
- None - No reportable interests on any schedule

5. Verification

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

Date Signed 3/27/14
(month, day, year)

**AGENCIES/COMMITTEES
FORM 700
COUNCIL MEMBER MARIE FELLHAUER**

AGENCY	POSITION	PERIOD
CITY OF EL SEGUNDO COUNCIL	COUNCIL MEMBER / MAYOR PRO TEM /	01/01/2013 12/31/2013
INDEPENDENT CITIES ASSOCIATION	DELEGATE	01/01/2013 12/31/2013
LEAGUE OF CALIFORNIA CITIES	DELEGATE	01/01/2013 12/31/2013
SOUTH BAY CITIES COUNCIL OF GOVERNMENTS (COG)	ALTERNATE	01/01/2013 12/31/2013
SOUTH BAY YOUTH PROJECT	ALTERNATE	01/01/2013 12/31/2013
BLUE RIBBON BICYCLE ADVISORY BOARD	DELEGATE	01/01/2013 12/31/2013

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

Marie Fellhauer

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
742 Loma Vista Street

CITY
El Segundo, CA 90245

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/_____
 \$10,001 - \$100,000 _____/_____/_____
 \$100,001 - \$1,000,000 _____/_____/_____
 Over \$1,000,000 _____/_____/_____

ACQUIRED 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
Stacy LaCotera

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/_____
 \$10,001 - \$100,000 _____/_____/_____
 \$100,001 - \$1,000,000 _____/_____/_____
 Over \$1,000,000 _____/_____/_____

ACQUIRED 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 TERM (Months/Years)
 _____% None _____

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 TERM (Months/Years)
 _____% None _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

