

AN2013

STATEMENT OF ECONOMIC INTERESTS

Date Received
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FAIR POLITICAL PRACTICES COMMISSION
TN

MAR 13 '14 PM 1:49

Please type or print in ink.

NAME OF FILER (LAST) Fitzgerald (FIRST) Shirley (MIDDLE) Lee

1. Office, Agency, or Court

Agency Name (Do not use acronyms) City of Fullerton
Division, Board, Department, District, if applicable
Your Position Council Member

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

Agency: Metropolitan Water District Position: Director, Fullerton

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

- State
- Multi-County _____
- City of Fullerton
- 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 2, 11, 2014
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2013, through the date of leaving of office.
- The period covered is _____ through the date of leaving of 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: _____
- 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 hereby certify that the information furnished herein and in any attached schedules is true and complete. I acknowledge that I am responsible for the accuracy and completeness of the information furnished. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/13/14
(month, day, year)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

Name Jennifer Fitzgerald

BUSINESS ENTITY OR TRUST

CL7 Communications, Inc.
 Name
P.O. Box 10306 Fullerton CA 92838
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Consulting
 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000
 IF APPLICABLE, LIST DATE: / /13 / /13
 ACQUIRED DISPOSED
 NATURE OF INVESTMENT
 Partnership Sole Proprietorship S Corp
 Other
 YOUR BUSINESS POSITION CEO, President

IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME IN THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

None

INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY
 Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
 Description of Business Activity or City or Other Precise Location of Real Property
 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000
 IF APPLICABLE, LIST DATE: / /13 / /13
 ACQUIRED DISPOSED
 NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold Yrs. remaining Other
 Check box if additional schedules reporting investments or real property are attached

BUSINESS ENTITY OR TRUST

Name
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000
 IF APPLICABLE, LIST DATE: / /13 / /13
 ACQUIRED DISPOSED
 NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other
 YOUR BUSINESS POSITION

IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME IN THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

None

INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY
 Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
 Description of Business Activity or City or Other Precise Location of Real Property
 FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000
 IF APPLICABLE, LIST DATE: / /13 / /13
 ACQUIRED DISPOSED
 NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold Yrs. remaining Other
 Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name

Jennifer Fitzgerald

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
449 W. Amerige

CITY
Fullerton

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 / 13 / DISPOSED / / 13

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
Ben Kunkel

▶ 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 / 13 / DISPOSED / / 13

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: _____

**SCHEDULE D
Income – Gifts**

▶ NAME OF SOURCE (Not an Acronym)
Griffin Structures, Inc.

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)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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: _____

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

TN

▶ 1. BUSINESS ENTITY OR TRUST

CLT Communications, Inc.
Name
P.O. Box 10306, Fullerton CA 92838
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$0 - \$1,999	___/___/13	___/___/13
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input checked="" type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INVESTMENT
 Partnership Sole Proprietorship S. Corp Other

YOUR BUSINESS POSITION CEO, President

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None
Campbell for Congress
Family Action Pac
Shawn Nelson for Orange County
Supervisor

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

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<input type="checkbox"/> \$2,000 - \$10,000	___/___/13	___/___/13
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

Comments: _____

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2014 APR - 7 AM 9:02

Filer's Verification

I certify under penalty of perjury under the laws

Date Signed 3-26-14
(month, day, year)

TO FPPC 4-1-14