

MAR 31 2014

Please type or print in ink.



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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF IRVINE

Division, Board, Department, District, if applicable

CITY COUNCIL

Your Position

COUNCILMEMBER

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

Agency: SEE ATTACHED

Position:

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
2014 APR 10 AM 11:05

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County

County of

City of IRVINE

Other

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

Annual: The period covered is January 1, 2013, through December 31, 2013.

Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2013.

The period covered is January 1, 2013, through the date of leaving office.

Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

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: \_\_\_\_\_

Schedule A-1 - Investments - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

Schedule D - Income - Gifts - schedule attached

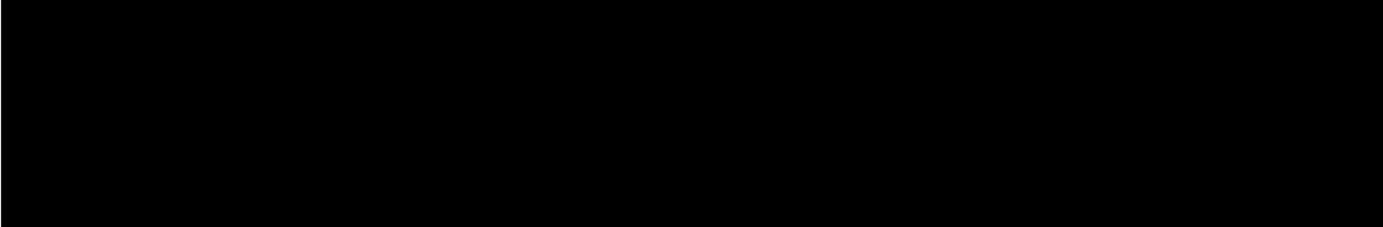
Schedule B - Real Property - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

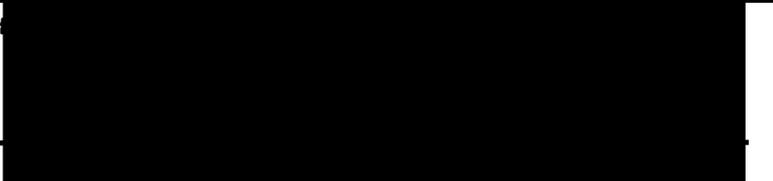
5. Verification



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

Date Signed

3/31/14  
(month, day, year)



**EXPANDED STATEMENT  
Mayor Pro Tem Jeffrey Lalloway**

**Attachment to Form 700  
2013 Annual Filing**

Following is a list of agencies I am a boardmember of as Councilmember of the City of Irvine:

- 1) Irvine City Council (Councilmember)
- 2) Irvine Industrial Development Authority
- 3) Irvine Public Facilities and Infrastructure Authority
- 4) Orange County Great Park Corporation
- 5) Orange County Council of Governments (Alternate)
- 6) Irvine Successor Agency to the dissolved Redevelopment Agency
- 7) Orange County Transportation Authority
- 8) Orange County Fire Authority

**SCHEDULE A-1  
Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)  
*Do not attach brokerage or financial statements.*

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Jeffrey Lalloway</u>
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▶ **NAME OF BUSINESS ENTITY**  
Johnson and Johnson

**GENERAL DESCRIPTION OF THIS BUSINESS**

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**FAIR MARKET VALUE**

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**

Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Berkshire Hathaway

**GENERAL DESCRIPTION OF THIS BUSINESS**

---

**FAIR MARKET VALUE**

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**

Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

▶ **NAME OF BUSINESS ENTITY**

**GENERAL DESCRIPTION OF THIS BUSINESS**

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**FAIR MARKET VALUE**

\$2,000 - \$10,000       \$10,001 - \$100,000  
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Stock       Other \_\_\_\_\_ (Describe)  
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**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

▶ **NAME OF BUSINESS ENTITY**

**GENERAL DESCRIPTION OF THIS BUSINESS**

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**FAIR MARKET VALUE**

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**

Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
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**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

▶ **NAME OF BUSINESS ENTITY**

**GENERAL DESCRIPTION OF THIS BUSINESS**

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**FAIR MARKET VALUE**

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**

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**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

▶ **NAME OF BUSINESS ENTITY**

**GENERAL DESCRIPTION OF THIS BUSINESS**

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**FAIR MARKET VALUE**

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**

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 Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

Comments: \_\_\_\_\_



**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
 Jeffrey Lalloway

INCOME RECEIVED	INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>Novartis Pharmaceuticals</u>	NAME OF SOURCE OF INCOME <u>City of Irvine</u>
ADDRESS (Business Address Acceptable) <u>East Hanover, NJ</u>	ADDRESS (Business Address Acceptable) <u>1 Civic Center Plaza, Irvine, CA</u>
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>pharmaceuticals</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE _____
YOUR BUSINESS POSITION <u>Medical Science Liasion</u>	YOUR BUSINESS POSITION <u>Councilmember</u>
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property (car, boat, etc.))</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ <small>(Describe)</small>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property (car, boat, etc.))</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental income, list each source of \$10,000 or more <input checked="" type="checkbox"/> Other <u>stipend</u> <small>(Describe)</small>

**LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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 _____	INTEREST RATE _____ % <input type="checkbox"/> None	TERM (Months/Years) _____
ADDRESS (Business Address Acceptable) _____	SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small>Street address</small> _____ <small>City</small> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>	
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
 Name: \_\_\_\_\_

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Orange County Transportation Authority

ADDRESS (Business Address Acceptable)  
Orange, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE:  
 \_\_\_\_\_

YOUR BUSINESS POSITION:  
Board of Directors

GROSS INCOME RECEIVED  
 \$500 - \$1,000     \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more:  
 \_\_\_\_\_

Other stipend  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Orange County Fire Authority

ADDRESS (Business Address Acceptable)  
Plume, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE:  
 \_\_\_\_\_

YOUR BUSINESS POSITION:  
Board of Directors

GROSS INCOME RECEIVED  
 \$500 - \$1,000     \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more:  
 \_\_\_\_\_

Other stipend  
(Describe)

**2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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  
 \_\_\_\_\_

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

INTEREST RATE                      TERM (Months/Years)  
 \_\_\_\_\_ %     None    \_\_\_\_\_

SECURITY FOR LOAN  
 None     Personal residence  
 Real Property \_\_\_\_\_  
Street address  
 \_\_\_\_\_  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_