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Official Use Only

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Ray George
2014 MAR 18 12:09

1. Office, Agency, or Court

CITY CLERK
CITY OF CERRITOS

Agency Name (Do not use acronyms)

City of Cerritos

Division, Board, Department, District, if applicable

Your Position

Councilmember

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

Agency: See attached

Position: See attached

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of Cerritos

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: 6

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 3-18-14
(month, day, year)

**Annual Statement of Economic Interests 2013-2014
Consolidated Form 700
Additional Agencies**

George Ray

Cerritos City Council

18125 Bloomfield Avenue, P.O. Box 3130
Cerritos, CA 90703
Councilmember

Successor Agency to the Cerritos Redevelopment Agency

18125 Bloomfield Avenue, P.O. Box 3130
Cerritos, CA 90703
Agency Member

Cerritos Public Financing Authority

18125 Bloomfield Avenue, P.O. Box 3130
Cerritos, CA 90703
Board Member

Cuesta Villas Housing Corporation

18125 Bloomfield Avenue, P.O. Box 3130
Cerritos, CA 90703
Director

Los Angeles County Sanitation Districts 2, 3, 18/Waste Management

4TH Alternate

Los Angeles County Sanitation District 19/Waste Management

4TH Alternate

1955 Workman Mill Road
P.O. Box 4998
Whittier, CA 90607-4998

Southeast Water Coalition Joint Powers Authority

City of Pico Rivera
6615 Passons Blvd.
Pico Rivera, CA 90660
Alternate

SELACO Workforce Investment Board – Policy Board

c/o Gateway Cities Council of Governments
16401 Paramount Boulevard
Paramount, CA 90723
Alternate

**SCHEDULE A-1
Investments**

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

Name
George Ray

▶ NAME OF BUSINESS ENTITY
WHL MART STORES INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retail SALES

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
1/2/09 _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Bank of America

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial Corporation

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
1/5/13 _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
McDonalds Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retail SALES

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
2/11/09 _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Baker Hughes Inc

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Manufacturing Co

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
3/12/13 _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Apple Inc

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retail SALES

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
2/8/12 _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
General Electric

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
General Manufacturing & Finance

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
3/12/13 _____
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

George Ray

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CITY OF CERRITOS

NAME OF BUSINESS ENTITY: Pepsico INC

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Retnic - Diversified Company

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
 _____ / _____ / _____
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY: _____

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: _____

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
 _____ / _____ / _____
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY: United Parcel Service

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Diversified Corporation

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
 2 / 8 / 11
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY: _____

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: _____

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
 _____ / _____ / _____
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY: United Health Care Group

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Health Care

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
 12 / 01 / 12
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY: _____

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: _____

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$100,001 - \$1,000,000
 \$10,001 - \$100,000
 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:
 _____ / _____ / _____
 ACQUIRED DISPOSED

Comments: _____

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SCHEDULE C
Income, Loans, & Business
Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
George Ray

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
LEFIELD Mfg. Co.

ADDRESS (Business Address Acceptable)
13700 Firestone Blvd
SFS, 90670

BUSINESS ACTIVITY, IF ANY, OF SOURCE
AEROSPACE Component Manufacturer

YOUR BUSINESS POSITION
Chairman of the 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 _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
KAPCO

ADDRESS (Business Address Acceptable)
3120 Enterprise Dr, Brea 92821

BUSINESS ACTIVITY, IF ANY, OF SOURCE
AEROSPACE Parts Distribution

YOUR BUSINESS POSITION
Member of the 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 _____
(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 _____ % None

TERM (Months/Years) _____

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

Comments: _____