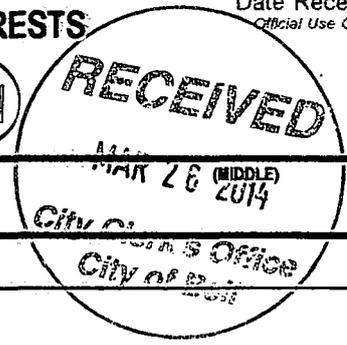


STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

TN



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Saleh Ali

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Bell
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: City of Bell / Successor Agency Position: Planning Commissioner / Board Member

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

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County County of
- City of Bell Other

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

- Annual: The period covered is January 1, 2013, through December 31, 2013.
- or- 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.
- Assuming Office: Date assumed
- 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: 5
- 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

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)



Date Signed March 26, 2014
(month, day, year)

SCHEDULE D
Income – Gifts

Name
Ali Saleh

▶ NAME OF SOURCE (Not an Acronym)
Parsons

ADDRESS (Business Address Acceptable)
100 West Walnut Street, Pasadena, CA 91124

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Rosebowl Parade

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1</u> / <u>1</u> / <u>13</u>	\$ <u>274.00</u>	<u>Parade Ticket</u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Official Miss Lebanon Imigrants West Coast USA

ADDRESS (Business Address Acceptable)
660 S. Figueroa St., Suite 1050, Los Angeles, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5</u> / <u>12</u> / <u>13</u>	\$ <u>325.00</u>	<u>Pageant Ticket</u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
AltaMed Health Services Corporation

ADDRESS (Business Address Acceptable)
2040 Camfield Ave., Los Angeles, CA 90040

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7</u> / <u>19</u> / <u>13</u>	\$ <u>300</u>	<u>Event Ticket</u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Human Services Association Los Angeles

ADDRESS (Business Address Acceptable)
6800 Florence Ave., Bell Gardens, CA 90201

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3</u> / <u>14</u> / <u>13</u>	\$ <u>100.00</u>	<u>Gala Ticket</u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Sprint

ADDRESS (Business Address Acceptable)
201 Mission St., Suite 1500, San Francisco, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10</u> / <u>28</u> / <u>13</u>	\$ <u>99.50</u>	<u>Concert Ticket</u>
<u>10</u> / <u>28</u> / <u>13</u>	\$ <u>75.00</u>	<u>Meal</u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Council of American-Islamic Relations (CAIR)

ADDRESS (Business Address Acceptable)
2180 W. Creasent Ave., Suite F, Anaheim, CA 92801

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11</u> / <u>16</u> / <u>13</u>	\$ <u>60.00</u>	<u>Gala Ticket</u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>	<u> </u>

Comments: _____

**SCHEDULE D
 Income – Gifts**

▶ NAME OF SOURCE (Not an Acronym)
University of Southern CA Government Relations

ADDRESS (Business Address Acceptable)
3551 Trousdale Parkway, Suite 260, Los Angeles, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 5 / 13	\$ 250.00	Gala Tickets
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Montebello Board of Realtors

ADDRESS (Business Address Acceptable)
1304 W. Beverly Blvd., Montebello, CA 90640

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 09 / 13	\$ 85.00	Gala Ticket
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
The Taste of Mexico Association

ADDRESS (Business Address Acceptable)
250 S. Beverly Drive, Suite 203, Beverly Hills, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 11 / 13	\$ 75.00	VIP Reception
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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 E Income – Gifts Travel Payments, Advances, and Reimbursements

Name
Ali Saleh

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)
CA Foundation on the Environment and the Economy

ADDRESS (Business Address Acceptable)
Pier 35, Suite 202

CITY AND STATE
San Francisco, CA 94133

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Conference

DATE(S): 4/25/13 - 4/26/13 AMT: \$ **\$528.89**
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)
The National Association of Latino Elected Officials

ADDRESS (Business Address Acceptable)
1122 W. Washington Blvd., 3rd Floor

CITY AND STATE
Los Angeles, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): 08/23/13 - 08/25/13 AMT: \$ **1,119.91**
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): _____ AMT: \$ _____
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)

DATE(S): _____ AMT: \$ _____
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

Comments: _____