

Please type or print in ink.

NAME OF FILER

2014 FEB 28 PM 3:22

(FIRST)

14 FEB 28 PM 2:52

(MIDDLE)

Jones

Dave

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

California Department of Insurance

Division, Board, Department, District, if applicable

Your Position

Insurance Commissioner

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

Agency: California Earthquake Authority

Position: Governing Board Member

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of _____

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 (c)(1)

herein and in any attached schedules is true and complete. I acknowledge this is (c)(1)
I certify under penalty of perjury under the laws of the State of California that

Date Signed 2/20/14
(month, day, year)

Signature

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Dave Jones

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME State of California <hr/> ADDRESS (Business Address Acceptable) 300 Capitol Mall, Suite 1700, Sacramento, CA <hr/> BUSINESS ACTIVITY, IF ANY, OF SOURCE <hr/> YOUR BUSINESS POSITION <hr/> 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 CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" 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, for each source of \$10,000 or more <hr/> <input type="checkbox"/> Other _____ <small>(Describe)</small>	NAME OF SOURCE OF INCOME <hr/> ADDRESS (Business Address Acceptable) <hr/> BUSINESS ACTIVITY, IF ANY, OF SOURCE <hr/> YOUR BUSINESS POSITION <hr/> GROSS INCOME RECEIVED <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 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, for each source of \$10,000 or more <hr/> <input type="checkbox"/> Other _____ <small>(Describe)</small>

▶ 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* <hr/> ADDRESS (Business Address Acceptable) <hr/> BUSINESS ACTIVITY, IF ANY, OF LENDER <hr/> 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	INTEREST RATE TERM (Months/Years) _____% <input type="checkbox"/> None _____ SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small style="margin-left: 150px;">Street address</small> _____ <small style="margin-left: 150px;">City</small> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <small style="margin-left: 150px;">(Describe)</small>
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Comments: _____

SCHEDULE D
Income – Gifts

Name
 Dave Jones

▶ NAME OF SOURCE (Not an Acronym)
 NBC Universal

ADDRESS (Business Address Acceptable)
 100 Universal City Plaza, Universal City, CA 91608

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 14 / 13	\$ 49.14	Dinner
07 / 14 / 13	\$ 338.00	2 -tickets Univ Studios
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)
 State Building & Construction Trades Council

ADDRESS (Business Address Acceptable)
 1225 8th Street, #375, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 22 / 13	\$ 200.00	Dinner
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)
 National Association of Insurance Commissioners

ADDRESS (Business Address Acceptable)
 1100 Walnut, Kansas City, MO, 64108

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 04 / 13	\$ 248.00	Chip bowl, hats, towels
08 / 27 / 13	\$ 25.00	Baseball bat
12 / 13 / 13	\$ 65.00	NAIC logo Backpack

▶ NAME OF SOURCE (Not an Acronym)
 The Griffith Foundation *

ADDRESS (Business Address Acceptable)
 720 Providence Road, Malvern, PA 19355

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

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 22 / 13	\$ 200.00	Reception/Dinner
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)
 California Asian Pacific Chamber of Commerce

ADDRESS (Business Address Acceptable)
 2012 H Street, Ste101, Sacramento, CA 95811

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 11 / 13	\$ 55.00	Dinner
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)
 Instituto Laboral De La Raza

ADDRESS (Business Address Acceptable)
 2947 16th Street, San Francisco, CA 94103

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 22 / 13	\$ 200.00	Dinner
/ /	\$	
/ /	\$	

Comments: *Spoke at seminar

SCHEDULE D
Income – Gifts

Name
 Dave Jones

▶ NAME OF SOURCE (Not an Acronym)
 Bay Area Council

ADDRESS (Business Address Acceptable)
 353 Sacramento St., 10th Fl, San Francisco, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 23 / 13	\$ 85.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 American Israel Public Affairs Committee

ADDRESS (Business Address Acceptable)
 251 H Street NW, Washington, D.C. 20001

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 13 / 13	\$ 120.00	BBQ Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 California Exposition & State Fair

ADDRESS (Business Address Acceptable)
 PO Box 15649, Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 California State Fair, Organizing Body

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 20 / 13	\$ 89.00	5 tickets & parking
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Consumer Attorneys of California**

ADDRESS (Business Address Acceptable)
 770 L Street, Ste 1200, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Attorneys. Political Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 16 / 13	\$ 17.29	Reception
11 / 16 / 13	\$ 200.00	Dinner
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Asian Business Association *

ADDRESS (Business Address Acceptable)
 120 S. San Pedro Street, Ste. 523, Los Angeles, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 501(c) 6 Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 24 / 13	\$ 70.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: * Spoke/Received Diversity Award, ** Speaker