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BY:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Gorell	Jeffrey	Frederick

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
State Assembly

Division, Board, Department, District, if applicable

Your Position
Assembly Member

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

Agency: _____ Position: _____

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

- [x] State
- [ ] Multi-County _____
- [ ] City of _____
- [ ] Judge or Court Commissioner (Statewide Jurisdiction)
- [ ] County of _____
- [ ] Other _____

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

- [x] **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 ___/___/_____
- [ ] **Candidate:** Election year _____ and office sought, if different than Part 1: _____
- [ ] **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.

4. Schedule Summary

Check applicable schedules or "None."

► ***Total number of pages including this cover page:*** 7

- [ ] **Schedule A-1** - *Investments* – schedule attached
- [ ] **Schedule A-2** - *Investments* – schedule attached
- [ ] **Schedule B** - *Real Property* – schedule attached
- [x] **Schedule C** - *Income, Loans, & Business Positions* – schedule attached
- [x] **Schedule D** - *Income – Gifts* – schedule attached
- [x] **Schedule E** - *Income – Gifts – Travel Payments* – schedule attached

-or-

- [ ] **None** - *No reportable interests on any schedule*

5. Verification

Date Signed 02/20/2014
(month, day, year)

Signatu

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Jeff Gorell

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
California State Assebmly

ADDRESS *(Business Address Acceptable)*
P.O. Box 942850 Sacramento, CA 942850

BUSINESS ACTIVITY, IF ANY, OF SOURCE
State Assembly

YOUR BUSINESS POSITION
State Assembly Member

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
Anderson Kill - Orlick PC

ADDRESS *(Business Address Acceptable)*
42nd Floor, New York, NY 10020

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm

YOUR BUSINESS POSITION
Senior Council

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: _____

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Jeff Gorell

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
United States Navy / DFAS

ADDRESS *(Business Address Acceptable)*
937 N. Harbor Dr. San Diego, CA 92132-0058

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Military

YOUR BUSINESS POSITION
Lt. Commander

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
Mixtus Inc. DBA Mustang Marketing

ADDRESS *(Business Address Acceptable)*
1090 Calle Arroyo

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Thousand Oaks, CA 91360

YOUR BUSINESS POSITION
Contract Model

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:

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Jeff Gorell

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
California Lutheran University

ADDRESS *(Business Address Acceptable)*
60 West Olsen Rd. Thousand Oaks, CA 91360

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Education

YOUR BUSINESS POSITION
Teacher

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
Sports Unlimited Talent Agency

ADDRESS *(Business Address Acceptable)*
Hollywood, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Talent Agency

YOUR BUSINESS POSITION
Model

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: _____

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Jeff Gorell

SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
California New Car Dealers Association
ADDRESS *(Business Address Acceptable)*
1415 L. St, Suite 700 Sacramento, CA95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Automobile Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 13 / 13	$ 70.98	Meal
03 / 13 / 13	$ 21.19	Entrtainment
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
AT&T Inc. and It's Affiliates
ADDRESS *(Business Address Acceptable)*
1215 K. st. Suite 1800, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Telecomunications

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 19 / 13	$ 153.93	KingsBasketball Ticket
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Farmers Group Inc
ADDRESS *(Business Address Acceptable)*
1201 K. St. Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 09 / 13	$ 52.44	Meal
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
California Association of Realtors
ADDRESS *(Business Address Acceptable)*
525 South Virgil Avenue, Los Angeles, CA 90020
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 01 / 13	$ 59.00	Reception
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
California State Protocol Foundation
ADDRESS *(Business Address Acceptable)*
11355 W. Olympic Blvd, Los Angeles, CA 90064
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public Policy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 06 / 13	$ 80.50	Meal
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Conejo Simi Moorpark Association of Realtors
ADDRESS *(Business Address Acceptable)*
463 Pennsfield Place#100 Thousand Oaks, CA91360
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 01 / 13	$ 70.98	Meal
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
CTIA – The Wireless Association
ADDRESS *(Business Address Acceptable)*
1400 16th St, NW, Suite 600, Washington, DC 20036
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wireless Industry Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 24 / 13	$ 64.18	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)
/ /	$	
/ /	$	
/ /	$	

► 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:

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Jeff Gorell

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

- **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)*
Independent Voter Project
ADDRESS *(Business Address Acceptable)*
101 West Broadway, Suite 1460
CITY AND STATE
San Diego, CA 92101
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☑ 501 (c)(~~3~~ 4)

DATE(S): 11/17/20 - 11/21/20 *(If gift)* AMT: $ 3,064.15

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): __/__/__ - __/__/__ *(If gift)* AMT: $

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): __/__/__ - __/__/__ *(If gift)* AMT: $

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): __/__/__ - __/__/__ *(If gift)* AMT: $

TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

Comments:

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PRACTICES COMMISSION
2014 MAR -4 PM 3:05

SCHEDULE D
Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

► NAME OF SOURCE *(Not an Acronym)*
The Walt Disney Company
ADDRESS *(Business Address Acceptable)*
500 S. Buena Vista St., Brubank, CA 91521
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07/15/13	$ 420	Tickets
/ /	$	
/ /	$	

► 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)
/ /	$	
/ /	$	
/ /	$	

Filer's Verification

Print Name Jeffrey Frederick Gorell

Office, Agency or Court State Assembly

Statement Type ☐ 2013/2014 Annual ☐ Assuming ☐ Leaving
☒ 2013 (yr) Annual ☐ Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

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

Date Signed 03/04/2013

(d)(5)

Filer's Signat

Comments: