

2013 A1

RECEIVED

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT
2014 MAR 28 PM 2:51

Date Received
Office Use Only
MAR 27 2014

BY: *[Signature]*

Please type or print in ink.

NAME OF FILER (LAST) Wieckowski (FIRST) Robert (MIDDLE) Anthony

1. Office, Agency, or Court

Agency Name
California State Assembly
Division, Board, Department, District, if applicable
Your Position
State Assemblymember

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

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

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

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

- Annual:** The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is _____, through December 31, 2012.
- 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, 2012, 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: 2
- Schedule A-1 - Investments** - schedule attached
 - Schedule A-2 - Investments** - schedule attached
 - Schedule B - Real Property** - schedule attached
 - Schedule C - Income, Loans, & Business Positions** - schedule attached
 - Schedule D - Income - Gifts** - schedule attached
 - Schedule E - Income - Gifts - Travel Payments** - schedule attached
- or-
- None - No reportable interests on any schedule**

5 (c)(1)

I certify under penalty of perjury under the laws of the State of California

Date Signed 03/25/2014
(month, day, year)

(c)(1)
Sig _____
(File the originally signed statement with your filing official.)

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE (Not an Acronym)
Women in California Leadership
 ADDRESS (Business Address Acceptable)
400 Capitol Mall, 22nd Floor Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 21 / 13</u>	<u>\$ 70.52</u>	<u>Food and Drink</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ 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)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
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<u> / / </u>	<u>\$ </u>	<u> </u>
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<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Filer's Verification

Print Name Robert Wiecekowski
 Office, Agency or Court CA Assembly

Statement Type 2012/2013 Annual Assuming Leaving
 2013 Annual Candidate
(yr)

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 3/26/14
(c)(1)

Filer's Signature 

Comments: _____

MAR 3 2014

Date Received
MAR 3 2014

Please type or print in ink.

NAME OF FILER (LAST) **Wleckowski** (FIRST) **Robert** **Anthony**

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

California State Assembly

Division, Board, Department, District, if applicable

Your Position

State Assemblymember

► 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)

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

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4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: _____

- Schedule A-1 - Investments - schedule attached
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- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached
- or-
- None - No reportable interests on any schedule

5 (c)(1)

I have used a reasonable diligence in preparing this statement. I have reviewed it herein and in any attached schedules is true and complete. I acknowledge this is I certify under penalty of perjury under the laws of the State of California that

Date Signed 03/03/2014
(month, day, year)

Signature

(File the originally signed statement with your filing official.)

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE *(Not an Acronym)*
Women in California Leadership
 ADDRESS *(Business Address Acceptable)*
400 Capitol Mall, 22nd Floor Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>08 / 21 / 13</u>	\$ <u> </u>	<u>Food and Drink</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

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 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>
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<u> / / </u>	\$ <u> </u>	<u> </u>
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Filer's Verification

Print Name Robert Wieckowski

Office, Agency or Court California State Assembly

Statement Type 2013/2014 Annual Assuming Leaving
 2013 Annual Candidate
(n)

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Date Signed 03/03/2014

Filer's Signature (c)(1)

Comments: _____



STATEMENT OF ECONOMIC INTERESTS
RECEIVED
FAIR POLITICAL PRACTICES COMMISSION

Date Received
FEB 26 2014

BY: B J H

Please type or print in ink.

2014 FEB 26 PM 2:37

NAME OF FILER (LAST) Wieckowski (FIRST) Robert (MIDDLE) Anthony

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
California State Assembly
Division, Board, Department, District, if applicable
Your Position
State Assemblymember

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- Check applicable schedules or "None." ► Total number of pages including this cover page: 6
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 - Schedule E - Income - Gifts - Travel Payments - schedule attached
- or-
- None - No reportable interests on any schedule

5. (c)(1)

I certify under penalty of perjury under the laws of the State of California that

Date Signed 02/26/2014
(month, day, year)

(c)(1)
Signature _____
(File the originally signed statement with your filing officer.)

Schedule D
Income - Gifts

CALIFORNIA FORM
FAIR POLITICAL PRACTICES COMMISSION
700
Name
Robert Wreckowski

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NAME OF SOURCE	ADDRESS OF SOURCE (Business Address Acceptable)	ZIP CODE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFTS)
California Healthcare Institute	888 Prospect Street, Ste 220, La Jolla, CA	92037	None	01/15/13	\$ 51.42	Biomed Innovation Reception
California Healthcare Institute	888 Prospect Street, Ste 220, La Jolla, CA	92037	None	12/05/13	\$ 43.50	CHI Life Sciences Academy
BayBio	400 Oyster Point Blvd, Suite 221 South San Francisco	94080	None	01/15/13	\$ 51.42	Biomed Innovation Reception
California Association of Wine Grape Growers reception	1325 J Street, Ste 1580, Sacramento, CA 95814	94133	None	01/29/13	\$ 43.75	Legislative reception and awards ceremony
California State Protocol Foundation	11355 West Olympic Boulevard Los Angeles, CA	90064	None	02/13/13	\$ 68.53	Dinner
California Democratic Party	1401 21st Street, #200, Sacramento, CA	95811	None	02/26/13	\$ 123.94	Democratic Causes Policy Conference Dinner
John A. Perez for Assembly	777 South Figueroa St, Ste 4050, Los Angeles, CA	90017	None	02/26/13	\$ 74.75	Personalized Jacket
California Cal Flower Commission	P.O. BOX 90225 Santa Barbara, CA	93190	None	02/27/13	\$ 49.00	Floral Arrangement
Cisco Systems, Inc.	415 L Street, Ste. 1200, Sacramento CA	95814	None	03/13/13	\$ 125.84	Dinner at Elia's
California State Council of Laborers	1121 L Street, Ste 502, Sacramento CA	95814	None	03/18/13	\$ 44.19	Reception at Frank Fat's
California Cattlemen's Association	1221 H Street, Sacramento CA	95814	None	03/20/13	\$ 60.00	Breakfast Reception and Hat
CTIA - The Wireless Association	1400 16th St. NW, Ste. 600, Washington, DC	20036	None	04/24/13	\$ 64.18	Reception at Oishi Sushi
California Council on Science and Technology	5005 La Mart Drive, Ste 200, Riverside, CA	92507	None	04/29/13	\$ 60.25	Reception at Cate Bernardo
California Association of Realtors	525 South Virgil Avenue Los Angeles, CA	90020	None	05/01/13	\$ 59.00	Reception at the Sheraton Grand
Consumer Attorneys of California	770 L Street, Suite 1200, Sacramento	95814	None	05/07/13	\$ 13.32	Reception at the MIX
Consumer Attorneys of California	770 L Street, Suite 1200, Sacramento	95814	None	11/16/13	\$ 200.00	Ticket to Instation and Awards Dinner
Amgen	601 13th Street NW, 12th Floor Washington, CA	20005	None	05/17/13	\$ 250.00	Ticket to Hospitality Tent
California Judges Association	925 L Street, Ste. 1250, Sacramento	95814	None	06/10/13	\$ 321.44	Reception at Sutter Club and award sculpture
John A. Perez for Assembly	777 South Figueroa St, Ste 4050, Los Angeles, CA	90017	None	08/06/13	\$ 44.60	Bottle of Wine
Green Diamond Resource Company	PO Box 1089 Arcata, CA	95518	None	9/18/13-9/19/13	\$ 180.59	Legislative Forestry Tour
Humboldt Redwood Company	PO Box 996 Ukiah, CA	95482	None	9/18/13-9/19/13	\$ 182.87	Legislative Forestry Tour
CASS, Inc. - Edward Kangelier	2730 Paralta St Oakland, CA	94607	None	10/05/13	\$ 375.00	Oakland As tickets

Schedule D
Income - Gifts

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name
 Robert Wreckowski

<BLUE> is a required field

NAME OF SOURCE	ADDRESS OF SOURCE <i>(Business Address Acceptable)</i>	ZIP CODE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE <i>(mm/dd/yy)</i>	VALUE	DESCRIPTION OF GIFT(S)
University of California Berkeley	2130 Center St 2nd Floor Berkeley, CA	94720	None	10/05/13	\$ 200.00	Game Tickets
California Long-Term Care Ombudsman Association	3950 Industrial Blvd., Suite 500 West Sacramento, CA	95691	None	11/05/13	\$ 58.32	Award Plaque
California Democratic Party	1401 21st Street, #200 Sacramento, CA	95811	None	12/05/13	\$ 95.19	Food & Beverage
Technet	5050 El Camino Real, Suite 106 Los Altos, CA	94088	None	12/13/13	\$ 50.24	Meal in connections with speech

<BLUE> is a required field

**SCHEDULE E
Income - Gifts
Travel Payments, Advances,
and Reimbursements**

CALIFORNIA FORM
FAIR POLITICAL PRACTICES COMMISSION

Name
Robert Wiecekowski

- You must 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 AND ADDRESS OF SOURCE (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3)	DATE(S) (mm/dd/yy) (# gift)	AMOUNT	TYPE OF PAYMENT (Gift or Income)	MADE A SPEECH/ PARTICIPATED IN A PANEL	DESCRIP
CA Foundation on the Environment and the Economy Pier 35, Ste. 202, San Francisco CA	Environmental Non-Profit	Y	02/07/13-2/08/13	\$ 386.14	Gift	Y	Made a Speech/Pa panel
CA Foundation on the Environment and the Economy Pier 35, Ste. 202, San Francisco CA	Environmental Non-Profit	Y	03/21/13 - 03/30/13	\$ 9,118.63	Gift		T1301 Study Trave Poland
Pacific Policy Research Foundation	Public Policy	Y	3/14/2013	\$ 512.14	Gift		
The Griffith Insurance Education Foundation	Education	Y	3/14/13 - 3/15/13	\$ 584.33	Gift	Y	Roundtable on Car Insurance 101 for