

MAR - 3 2014  
RD

Please type or print in ink.

NAME OF FILER (LAST) 2014 MAR -3 PM 5: 07 (FIRST) (MIDDLE)  
WRIGHT RODERICK DEVON

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CA STATE LEGISLATURE

Division, Board, Department, District, if applicable

Your Position

STATE SENATE, 35TH DISTRICT

SENATOR

► 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)

- 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: 9

- 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. [Redacted Signature Area]

herein and in any attached schedules is true and complete. I acknowledge this is a

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

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

Signature

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
**RODERICK D. WRIGHT**

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
**868 Glenway Drive**

CITY  
**Inglewood, CA 90302**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED      /      / 13      DISPOSED      /      / 13

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_       Other \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None  
**Wanda Sanders/Samahndi Cunningham/Donna El Armonte/Autumn Paysinger**

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
**7627 S. Dalton Avenue**

CITY  
**Los Angeles**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED      /      / 13      DISPOSED      /      / 13

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_       Other \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

\* You are not required to report loans from commercial lending institutions 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 \_\_\_\_\_

INTEREST RATE \_\_\_\_\_%      TERM (Months/Years) \_\_\_\_\_  
 None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_%      TERM (Months/Years) \_\_\_\_\_  
 None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_



**SCHEDULE D**  
**Income – Gifts**

Name  
**RODERICK D. WRIGHT**

▶ NAME OF SOURCE (Not an Acronym)  
**CA Tribal Business Alliance**

ADDRESS (Business Address Acceptable)  
**1530 J Street, Suite 410, Sacramento 95814**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Back to Session Bash Reception**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 16 / 13	\$ 25.25	food & beverage
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**CA Teachers Association**

ADDRESS (Business Address Acceptable)  
**1118 10th Street, Sacramento 95814-3504**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Reception**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 29 / 13	\$ 31.18	food & beverage
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Distilled Spirits Council of the United States**

ADDRESS (Business Address Acceptable)  
**1250 Eye Street, N.W., Suite 400, Washington, D.C.**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Reception at Chop's**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 30 / 13	\$ 57.57	food & beverage
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**CA Democratic Party**

ADDRESS (Business Address Acceptable)  
**1401 21st Street, #200, Sacramento 95811**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Senate Caucus Policy Summit**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 05 / 13	\$ 90.37	meals & event catering
02 / 06 / 13	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**CA State Protocol Foundation**

ADDRESS (Business Address Acceptable)  
**11355 West Olympic Blvd., Los Angeles 90064**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 06 / 13	\$ 93.96	dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Cigar Association of America**

ADDRESS (Business Address Acceptable)  
**818 Connecticut Ave., NW, #200, Washington, D.C.**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Dinner**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 01 / 13	\$ 207.36	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
**RODERICK D. WRIGHT**

▶ NAME OF SOURCE (Not an Acronym)  
**CA Hospital Association**

ADDRESS (Business Address Acceptable)  
**1215 K Street, Sacramento 95814**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Reception**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 13 / 13	\$ 30.09	food & beverage
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**CA Automatic Vendors Council**

ADDRESS (Business Address Acceptable)  
**80 South Lake, #538, Pasadena 91101**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Lobbyist Employers**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 15 / 13	\$ 20.00	Gift Bag delivered to of
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**CA Association of Winegrape Growers**

ADDRESS (Business Address Acceptable)  
**1325 J Street, Suite 1560, Sacramento 95814**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Lobbyist Employer**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 05 / 13	\$ 86.98	dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Verizon**

ADDRESS (Business Address Acceptable)  
**1201 K Street, Suite 1980, Sacramento 95814**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Lobbyist Employer**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 08 / 13	\$ 13.02	beverage (reimbursed)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**The Del Mar Thoroughbred Club**

ADDRESS (Business Address Acceptable)  
**P.O. Box 700, Del Mar, CA 92014-0700**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Lobbyist Employer**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 17 / 13	\$ 345.00	admission, food, parkin
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**The Commerce Casino**

ADDRESS (Business Address Acceptable)  
**6131 E. Telegraph Road, Commerce, CA 90040**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**30th Anniversary Celebration**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 01 / 13	\$ 70.50	meal&gift (reimbursed)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
**RODERICK D. WRIGHT**

▶ NAME OF SOURCE (Not an Acronym)  
**Chukchansi Economic Development Authority**

ADDRESS (Business Address Acceptable)  
**46575 Road 417, Bldg. 17, Coarsegold, CA 93614**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Annual Legislative Back to Session Bash**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 16 / 13	\$ 6.48	food&drink(reimbursed)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**CA Sustainable Winegrowing Alliance**

ADDRESS (Business Address Acceptable)  
**425 Market Street, Suite 1000, SF 94105**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Down to Earth Leg. Reception**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 17 / 13	\$ 14.06	food&drink(reimbursed)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Jackson Gualco of The Gualco Group, Inc.**

ADDRESS (Business Address Acceptable)  
**500 Capitol Mall, Suite 2600, Sacramento 95814-475**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Lobbyist**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 30 / 13	\$ 10.00	beverage(reimbursed)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**CA International Relations Foundation**

ADDRESS (Business Address Acceptable)  
**1020 N Street, Suite 516**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Honoring a delegation/Parliament of Azerbaijan**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 11 / 13	\$ 107.37	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**CA Electric Transportation Coalition**

ADDRESS (Business Address Acceptable)  
**1015 K Street, Suite 200, Sacramento 95814**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Breakfast briefing/VIP Tour at L.A. Auto Show**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 25 / 13	\$ 38.06	food/drink/VIP tour
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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 D**  
**Income – Gifts**

Name  
**RODERICK D. WRIGHT**

▶ NAME OF SOURCE *(Not an Acronym)*  
 Western States Petroleum Association

ADDRESS *(Business Address Acceptable)*  
 1415 L Street, Suite 1200, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Legislative Dinner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 04 / 13	\$ 330.54	food&drink(reimbursed)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: \_\_\_\_\_

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

Name  
RODERICK D. WRIGHT

- 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 & 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)  
Roundtable Conference on Energy  
 DATE(S): 04 / 25 / 13 - 04 / 26 / 13 AMT: \$ 527.98  
 (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)  
CA Leg.Black Caucus Policy Institute Leadership Sym  
 ADDRESS (Business Address Acceptable)  
5471 Hillcrest  
 CITY AND STATE  
Los Angeles, CA 90043  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Legislative Leadership Symposium  
 DATE(S): 10 / 18 / 13 - 10 / 20 / 13 AMT: \$ 1,965.00  
 (If gift)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
 Made a Speech/Participated in a Panel  
 Other - Provide Description \_\_\_\_\_  
conference participant - lodging and food, Spa.

▶ NAME OF SOURCE (Not an Acronym)  
CA Independent Petroleum Association  
 ADDRESS (Business Address Acceptable)  
1001 K Street, 6th Floor  
 CITY AND STATE  
Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Oil Symposium at Terranea Resort  
 DATE(S): 11 / 14 / 13 - 11 / 15 / 13 AMT: \$ 724.05  
 (If gift)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
 Made a Speech/Participated in a Panel  
 Other - Provide Description \_\_\_\_\_  
Cost covers one night lodging, dinner and breakfast

▶ 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)  
Business & Leadership Policy Conference  
 DATE(S): 11 / 17 / 13 - 11 / 21 / 13 AMT: \$ 3,064.14  
 (If gift)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
 Made a Speech/Participated in a Panel  
 Other - Provide Description \_\_\_\_\_  
cost covers airfare, lodging, dinner and receptions

Comments: \_\_\_\_\_

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

Name  
 RODERICK D. WRIGHT

- 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 Correctional Peace Officers Association

ADDRESS (Business Address Acceptable)  
 1415 L Street

CITY AND STATE  
 Sacramento, CA 95814

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

DATE(S): 11 / 21 / 13 - \_\_\_\_ / \_\_\_\_ / \_\_\_\_ AMT: \$ 221.24  
 (if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide Description \_\_\_\_\_  
 Dinner during the Independent Voter Project Business & Leadership Policy Conference

▶ 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)

DATE(S): 12 / 09 / 13 - 12 / 10 / 13 AMT: \$ 431.59  
 (if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide Description \_\_\_\_\_  
 lodging, lunch, dinner, reception(s), breakfast

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

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

Nonprofit Organization

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: \_\_\_\_\_