

STATEMENT OF ECONOMIC INTERESTS

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

Marquez Luis CITY OF DOWNEY

CITY CLERKS OFFICE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Downey

Division, Board, Department, District, if applicable

City Council

Your Position

Council Member - District 1

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

Agency: See Attached Position:

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

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County Los Angeles/Orange Counties County of Los Angeles
- City of Downey Other

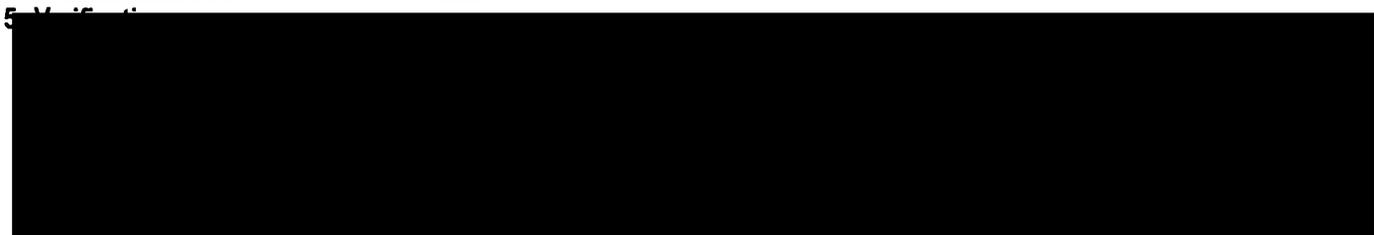
3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2014, through December 31, 2014. Leaving Office: Date Left ____/____/____ (Check one)
- or- The period covered is ____/____/____, through December 31, 2014. The period covered is January 1, 2014, through the date of leaving office.
- Assuming Office: Date assumed 01 / 13 / 2015 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." 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

► Total number of pages including this cover page: 3



I certify under penalty of perjury under the laws of the State of California that the information furnished herein and in any attached schedules is true and complete.

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Date Signed 2-9-15 (month, day, year)

MARQUEZ, LUIS

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CITY OF DOWNEY
CITY CLERKS OFFICE

Part 1. Office, Agency or Court (Con't)

<u>Agency:</u>	<u>Position:</u>	<u>Type:</u>
City of Downey	Council Member	Annual
Gateway City Council of Governments Executive Committee	Director	Annual
Gateway City Council of Governments I-710 Executive Committee	Director	Annual
Orange Line Development Authority	Director	Annual
Southeast Area Animal Control Authority	Director	Annual
Los Angeles County Sanitation Districts Nos. 2 & 18	Director	Assuming Ofc.
Interstate 5 Consortium Cities Policy Board (I-5)	Alternate Board Member	Annual

Name _____

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE (Not an Acronym)
Latino Caucus Foundation
 ADDRESS (Business Address Acceptable)
777 S. Figueroa St. Los Angeles, 90071
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Kevin De Leon - Pre-Inauguration Reception

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10/15/14</u>	<u>\$ 36.25</u>	<u>food + beverage</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Krikorian Premier Theatres
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Movie Theatre

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>Annual</u>	<u>\$ 283.50</u>	<u>Movie Passes</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)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ 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)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: _____