

STATEMENT OF ECONOMIC INTERESTS



COVER PAGE

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**CITY OF CALABASAS
 CITY CLERKS OFFICE**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Martin Lucy Marie

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
 City of Calabasas
 Division, Board, Department, District, if applicable
 City Council
 Your Position
 Councilmember

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

Agency: Las Virgenes-Malibu Council of Governments Position: Boardmember

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

- State
- Multi-County _____
- City of Calabasas
- 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, 2014, through December 31, 2014.
- or-
- The period covered is _____ through December 31, 2014.
- 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, 2014, 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: 3

- 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.

I have used all reasonable diligence in preparing this statement. The information herein and in any attached schedules is true and complete. I acknowledge and I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 9th, 2015
 (month, day, year)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name _____

▶ NAME OF BUSINESS ENTITY
Arena Pharmaceuticals

GENERAL DESCRIPTION OF THIS BUSINESS
Bio -Tech

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
1 / 28 / 14 _____ / _____ / 14
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Vanguard S & P 500

GENERAL DESCRIPTION OF THIS BUSINESS
Diversified Stock

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
6 / 27 / 14 _____ / _____ / 14
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Nuveen

GENERAL DESCRIPTION OF THIS BUSINESS
Tax Free Bonds

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT Bond
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
7 / 18 / 14 _____ / _____ / 14
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Vanguard Mid Cap Index

GENERAL DESCRIPTION OF THIS BUSINESS
Diversified Stock

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
6 / 27 / 14 _____ / _____ / 14
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
_____ / _____ / 14 _____ / _____ / 14
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
_____ / _____ / 14 _____ / _____ / 14
ACQUIRED DISPOSED

Comments: _____

