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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS



COVER PAGE

CITY OF WESTLAKE VILLAGE

WESTLAKE VILLAGE, CA

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Westlake Village
Division, Board, Department, District, if applicable
Your Position
Member of the City Council

► 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
- Multi-County _____
- City of Westlake Village
- 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, 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: _____
- 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



Date Signed 3-15-2015
(month, day, year)

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PRACTICES COMMISSION
2015 APR -6 PM 4: 19

**SCHEDULE D
Income - Gifts**

Name
Susan McSweeney

▶ NAME OF SOURCE (Not an Acronym)
Richards, Watson, Gershon

ADDRESS (Business Address Acceptable)
355 S. Grand Ave., 40th Floor, Los Angeles, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 16 / 14</u>	<u>\$ 424.00</u>	<u>dinner</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>

Comments: _____