CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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CITY OF ALHAMBRA
CITY CLERK'S OFFICE

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
CITY OF ALHAMBRA

Division, Board, Department, District, if applicable: CITY COUNCIL

Your Position: COUNCILMEMBER - SECOND DISTRICT

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

Agency: PLEASE SEE ATTACHED LIST

Position: PLEASE SEE ATTACHED LIST

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

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

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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 ____/____/_____

☐ **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.

☐ **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:*** 7

- ☒ **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*

[redacted]

herein and in any attached schedules is true and complete. I ackn[redacted]

I certify under penalty of perjury under the laws of the State o[redacted]

Date Signed 3/24/15
(month, day, year)

FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

EXPANDED STATEMENT – BARBARA A. MESSINA - 2014

1. SOUTHERN CALIFORNIA ASSOCIATION OF GOVERNMENTS REPRESENTATIVE
(Annual – Calendar Year 2014)

CG

2. CITY SELECTION COMMITTEE – LOS ANGELES COUNTY ALTERNATE REPRESENTATIVE
(Annual – Calendar Year 2014)

3. SAN GABRIEL VALLEY COUNCIL OF GOVERNMENTS COUNTY REPRESENTATIVE
(Annual – Calendar Year 2014)

SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
BARBARA A. MESSINA

► NAME OF BUSINESS ENTITY
AMERITRADE BROKERAGE COMPANY

GENERAL DESCRIPTION OF THIS BUSINESS
COMPANY STOCKS BROKERAGE

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 ACQUIRED ___/___/ 14 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 ACQUIRED ___/___/ 14 DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
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☐ $100,001 - $1,000,000 ☐ Over $1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____ (Describe)
☐ Partnership ○ Income Received of $0 - $499
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IF APPLICABLE, LIST DATE:
___/___/ 14 ACQUIRED ___/___/ 14 DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
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☐ $100,001 - $1,000,000 ☐ Over $1,000,000

NATURE OF INVESTMENT
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IF APPLICABLE, LIST DATE:
___/___/ 14 ACQUIRED ___/___/ 14 DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
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► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
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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 ACQUIRED ___/___/ 14 DISPOSED

Comments: *SEE ATTACHED LIST OF STOCKS OVER $2,000 IN VALUE

Barbara Messina
Councilwoman - City of Alhambra
California Form 700
Schedule A-1
Holdings as of December 31, 2014

Name Of Business Entity	General Description of Business Activity	$2,000 - $10,000	$10,001 - $100,000	$100,001 - $1,000,000	Over $1,000,000	Nature of Investment	Acquired	Disposed
3m Company	Conglomerate		X			Stock	07/10/13	
Abbott Labs	Pharmaceuticals	X				Stock	05/04/10	
Abbvie	Pharmaceuticals	X				Stock	05/04/10	
Anadarko Pete Corp	Independent Oil & Gas	X				Stock	05/03/10	
Apple Inc	Technology		X			Stock	07/10/13	
Applied Materials	Technology		X			Stock	12/20/11	
AT&T	Telecommunications		X			Stock	07/10/13	
Avon Products Inc	Consumer	X				Stock	08/19/14	
Barrick Gold Corporation	Gold	X				Stock	07/10/13	
Chevron Corp	Oil & Gas		X			Stock	07/10/13	
ConocoPhillips	Intergrated Oil & Gas	X				Stock	05/05/08	
Costco Wholesale Crp Del	Discount Variety Stores		X			Stock	07/10/13	
Crescent Energy Corp	Utility	X				Stock	05/07/10	08/19/14
Devon Energy Corp New	Independent Oil & Gas	X				Stock	05/19/10	
Disney (Walt) Co Com Stk	Entertainment	X				Stock	07/10/13	
Duke Energy Corp	Utility	X				Stock	07/10/13	
Emerson Elec Co	Industrial Equipment	X				Stock	07/10/13	
Exxon Mobil Corp Com	Oil & Gas		X			Stock	06/21/07	
Goldcorp Inc	Gold		X			Stock	06/05/09	
Honeywell Intl Inc Del	Aerospace/Defense	X				Stock	07/10/13	
Intel Corp	Semiconductor		X			Stock	07/10/13	
Intl Business Machines Corp Ibm	Technology	X				Stock	07/10/13	
Johnson & Johnson	Consumer Staples		X			Stock	07/10/13	
Nestle S A Rep Rg Sh Adr	Foods	X				Stock	05/21/10	
Northrop Grumman Corp	Aerospace/Defense		X			Stock	07/10/13	
Philip Morris Int'l Inc	Consumer	X				Stock	08/19/14	
Procter & Gamble Co	Consumer Staples		X			Stock	07/10/13	
Schlumberger Ltd	Energy Exploration		X			Stock	04/30/10	
Southern Company	Utility	X				Stock	05/19/10	
Thermo Fisher Scientific Inc	Medical Equipment	X				Stock	05/07/10	

SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION
Name
BARBARA A. MESSINA

▶ 1. BUSINESS ENTITY OR TRUST

MESSINA DEVELOPMENT CO.
Name
1101 SO. SECOND STREET
Address *(Business Address Acceptable)*

Check one
☐ Trust, *go to 2* ☑ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF THIS BUSINESS
REAL ESTATE DEVELOPMENT AND RENTAL

FAIR MARKET VALUE
☑ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

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

NATURE OF INVESTMENT
☐ Partnership ☑ Sole Proprietorship ☐ _____ Other

YOUR BUSINESS POSITION OWNER

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☑ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

☑ None or ☐ Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

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

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

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold _____ Yrs. remaining ☐ Other _____

☐ Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

MESSINA FAMILY TRUST
Name
1101 SO. SECOND STREET
Address *(Business Address Acceptable)*

Check one
☑ Trust, *go to 2* ☐ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
☐ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

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

NATURE OF INVESTMENT
☐ Partnership ☐ Sole Proprietorship ☐ _____ Other

YOUR BUSINESS POSITION

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☑ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

☑ None or ☐ Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☑ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property
1101 SO SECOND STREET, ALHAMBRA, CA

Description of Business Activity or
City or Other Precise Location of Real Property

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

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

NATURE OF INTEREST
☑ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold _____ Yrs. remaining ☐ Other _____

☐ Check box if additional schedules reporting investments or real property are attached

Comments:_____

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
BARBARA A. MESSINA

SCHEDULE B
Interests in Real Property
(Including Rental Income)

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1101 SO SECOND STREET

CITY
ALHAMBRA, CA

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

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

NATURE OF INTEREST
- ☑ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold _____ 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

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

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

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

NATURE OF INTEREST
- ☐ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold _____ 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 ____% ☐ None

TERM (Months/Years)

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 ____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

☐ Guarantor, if applicable

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
BARBARA A. MESSINA

SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
BURKE, WILLIAMS & SORRENSEN
ADDRESS *(Business Address Acceptable)*
444 FLOWER STREET, LOS ANGELES, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE
LAW FIRM

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01/31/14	$114.00	DINNER
05/15/14	$143.00	DINNER
07/11/14	$125.00	DINNER

► 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)*
LELAND DOLLEY
ADDRESS *(Business Address Acceptable)*
601 13TH STREET, MANHATTAN BEACH, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE
ATTORNEY

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04/19/14	$150.00	FUNDRAISER-SOLIS
/ /	$	
/ /	$	

► 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)*
ALLIED PHYSICIANS IPA
ADDRESS *(Business Address Acceptable)*
1668 SO. GARFIELD AVENUE, ALHAMBRA, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE
PHYSICIANS

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/14/14	$250.00	DINNER
/ /	$	
/ /	$	

► 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: