

STATEMENT OF ECONOMIC INTERESTS



COVER PAGE

Date Initial Filing  
Received  
Official Use Only

E-Filed  
03/12/2015  
21:52:06

Filing ID:  
154546760

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Morehouse, Carl

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF VENTURA

Division, Board, Department, District, if applicable

Your Position

City Council

Councilmember/Successor Agency/PPFA

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

Agency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS

Position:

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County

County of

City of San Buenaventura

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 / /

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: 3

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

Date Signed 03/12/2015 (month, day, year)

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
Expanded Statement Attachment**

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name  Carl Morehouse

Agency	Division/Board/Dept/District	Position	Type of Statement
CITY OF VENTURA	City Council	Councilmember	Annual 1/1/2014 - 12/31/2014
CITY OF VENTURA	Gold Coast Transit	Member	Annual 1/1/2014 - 12/31/2014
CITY OF VENTURA	Local Agency Formation Commission	Member	Annual 1/1/2014 - 12/31/2014
CITY OF VENTURA	Point Mugu Regional Airport Authority	Alternate Member	Annual 1/1/2014 - 12/31/2014
CITY OF VENTURA	Regional Defense Partnership 21st Century	Alternate Member	Annual 1/1/2014 - 12/31/2014
CITY OF VENTURA	Southern California Association of Governments	Member	Annual 1/1/2014 - 12/31/2014
CITY OF VENTURA	Ventura Council of Governments	Member	Annual 1/1/2014 - 12/31/2014
CITY OF VENTURA	Ventura County Transportation Commission/Vista Committee	Member	Annual 1/1/2014 - 12/31/2014
CITY OF VENTURA	City Council	Councilmember/Successor Agency/PFFA	Annual 1/1/2014 - 12/31/2014

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

<b>CALIFORNIA FORM 700</b>
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name  <u>Morehouse, Carl</u>

- 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)  
League of California Cities  
ADDRESS (Business Address Acceptable)  
1400 K Street  
CITY AND STATE  
Sacramento, CA 95814

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Advocacy for cities and their residents.

DATE(S): 01 / 01 / 14 - 12 / 31 / 14 AMT: \$ 1,387.77  
(If gift)

TYPE OF PAYMENT: (must check one)     Gift     Income

Made a Speech/Participated in a Panel

Other - Provide Description Travel, meals and lodging for  
volunteer services as a member of the League Board  
of Directors

▶ NAME OF SOURCE (Not an Acronym)  
League of California Cities  
ADDRESS (Business Address Acceptable)  
1400 K Street  
CITY AND STATE  
Sacramento, CA 95814

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Advocacy for cities and their residents.

DATE(S): 01 / 01 / 14 - 12 / 31 / 14 AMT: \$ 146.16  
(If gift)

TYPE OF PAYMENT: (must check one)     Gift     Income

Made a Speech/Participated in a Panel

Other - Provide Description Meals provided for family  
members

▶ NAME OF SOURCE (Not an Acronym)  
Institute of Policy and Management, Chinese Academy  
of Sciences c/o SCAG  
ADDRESS (Business Address Acceptable)  
818 West 7th Street 12th Floor  
CITY AND STATE  
Los Angeles, CA 90017

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE  
International Regional Planning and Interagency  
Collaboration Discussion (IRPICD)

DATE(S): 06 / 19 / 14 - 06 / 20 / 14 AMT: \$ 2,431.90  
(If gift)

TYPE OF PAYMENT: (must check one)     Gift     Income

Made a Speech/Participated in a Panel

Other - Provide Description Economy class airfare to  
attend symposium

▶ NAME OF SOURCE (Not an Acronym)  
\_\_\_\_\_  
ADDRESS (Business Address Acceptable)  
\_\_\_\_\_  
CITY AND STATE  
\_\_\_\_\_

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE(S):    /   /    -    /   /    AMT: \$      
(If gift)

TYPE OF PAYMENT: (must check one)     Gift     Income

Made a Speech/Participated in a Panel

Other - Provide Description \_\_\_\_\_

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