

STATEMENT OF ECONOMIC INTERESTS

CG

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE
2015 APR -1 AM 10:17

RECEIVED
Date Initial Filing
Received
MARCH 10, 2015
Official Use Only
CITY CLERK
CITY OF INDUSTRY

Please type or print in ink.

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

1. Office, Agency, or Court

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

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

Agency: See Attachment "A" Position:

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

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County County of
- City of Industry Other Agency

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 03/10/2015
(month, day, year)

SCHEDULE D
Income – Gifts

Name
 Spohn, Tim

▶ NAME OF SOURCE (Not an Acronym)
 CNC Engineering

ADDRESS (Business Address Acceptable)
 255 N. Hacienda Blvd., City of Industry, CA 91744

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Engineering Firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 12 / 14	\$ 75.00	Gift Certificate/Lunch
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: _____

Name: Spohn, Tim

**ATTACHMENT "A"
EXPANDED STATEMENT LIST**

<u>NAME OF AGENCY</u>	<u>OFFICE/POSITION</u>
Industrial Development Authority	Board Member
Industry Public Facilities Authority	Board Member
Industry Public Utilities Commission	Commissioner
Successor Agency to the Industry Urban- Development Agency	Board Member
Alameda Corridor-East Construction Authority	Board Member
Foothill Transit Authority	Alternate
Los Angeles County Sanitation Districts 15, 18 and 21	Alternate
San Gabriel Valley Council of Governments	Board Member
Southern California Association of Governments	Board Member
Gateway Cities Council of Governments	Board Member

C