

STATEMENT OF ECONOMIC INTERESTS

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NAME OF FILER (LAST) CLARKE (FIRST) JAMES
2015 MAR 31 AM 9:40
CITY BYRNE
CITY MANAGER'S OFFICE
CITY OF CULVER CITY

1. Office, Agency, or Court

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

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

Agency: see attachment
Position: See attachment

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

- State
- Multi-County _____
- City of Culver City, CA
- 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 _____
- 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: 28
- 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. [Redacted]

herein and in any attached schedules is true and complete. I acknowledge that I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/31/2015
(month, day, year)

California Form 700 - Statement of Economic Interests
Annual Statement for the Period: January 1, 2014 to December 31, 2014
Name of Filer: James Byrne Clarke
Filing for Multiple Jurisdictions Attachment

1. Office, Agency or Court

City of Culver City
(Jurisdictional Boundaries: Corporate Limits of the City of Culver City)
Position: City Council Member

Culver City Redevelopment Financing Authority
(Jurisdictional Boundaries: Corporate Limits of the City of Culver City)
Position: Board Members

Culver City Parking Authority
(Jurisdictional Boundaries: Corporate Limits of the City of Culver City)
Position: Board Member

Culver City Housing Authority
(Jurisdictional Boundaries: Corporate Limits of the City of Culver City)
Position: Board Member

Successor Agency to the Culver City Redevelopment Agency
(Jurisdictional Boundaries: Corporate Limits of the City of Culver City)
Position: Board Member

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name
James B. Clarke

▶ **NAME OF BUSINESS ENTITY**
Cisco Systems

GENERAL DESCRIPTION OF THIS BUSINESS
Computer systems

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 Motors Co.

GENERAL DESCRIPTION OF THIS BUSINESS
Automotive Manufacturing

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**
Citigroup Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Financial Services

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**
JP Morgan Chase & Co.

GENERAL DESCRIPTION OF THIS BUSINESS
Financial Services

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**
CVS Health Group

GENERAL DESCRIPTION OF THIS BUSINESS
Pharmacies

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**
Phillips 66 Com

GENERAL DESCRIPTION OF THIS BUSINESS
Petroleum Products

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: _____

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

James B. Clarke

▶ NAME OF BUSINESS ENTITY
Royal Dutch Shell PLC

GENERAL DESCRIPTION OF THIS BUSINESS
Petroleum Products

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
Unumprovident Corp.

GENERAL DESCRIPTION OF THIS BUSINESS
Insurance Services

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
Target Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
Retail Products

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
Wells Fargo & Company

GENERAL DESCRIPTION OF THIS BUSINESS
Financial Services

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
Time Warner Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Telecommunications

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
Direct TV Holdings

GENERAL DESCRIPTION OF THIS BUSINESS
Telecommunications

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: _____

SCHEDULE D
Income – Gifts

▶ **NAME OF SOURCE (Not an Acronym)**
League of California Cities
 ADDRESS (Business Address Acceptable)
1400 K Street, Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Municipal Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 22 / 14	\$ 50.00	Reception b4 mtg
01 / 23 / 14	\$ 30.00	Lunch w/ mtg
04 / 03 / 14	\$ 30.00	Lunch w/ mtg

▶ **NAME OF SOURCE (Not an Acronym)**
California Apartment Association
 ADDRESS (Business Address Acceptable)
7323 W. Sunset Blvd., Los Angeles, CA 90046
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 30 / 14	\$ 50.00	Reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**
League of California Cities
 ADDRESS (Business Address Acceptable)
1400 K Street, Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Municipal Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 03 / 14	\$ 50.00	Dinner after mtg
06 / 19 / 14	\$ 30.00	Lunch w/ mtg
___ / ___ / ___	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**
Sony Pictures Entertainment
 ADDRESS (Business Address Acceptable)
10100 W. Washington Blvd., Culver City, CA 90232
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 01 / 14	\$ 50.00	Reception & movie
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**
Modern Parking
 ADDRESS (Business Address Acceptable)
1200 Wilshire Blvd #300, Los Angeles, CA 90017
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Parking services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 13 / 14	\$ 20.00	Lunch mtg
04 / 22 / 14	\$ 18.00	Lunch mtg
10 / 16 / 14	\$ 20.00	Lunch mtg

▶ **NAME OF SOURCE (Not an Acronym)**
Annenberg Foundation
 ADDRESS (Business Address Acceptable)
2000 Avenue of the Stars #1000, LA, CA 90067
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Family foundation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 09 / 14	\$ 50.00	Lunch & conference
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____

SCHEDULE D
Income – Gifts

Name
James B. Clarke

▶ NAME OF SOURCE *(Not an Acronym)*
Foster Care Counts

ADDRESS *(Business Address Acceptable)*
11111 Santa Monica Blvd #1650, LA, CA 90025

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit child welfare organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 11 / 14	\$ 50.00	Food/reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
The Help Group

ADDRESS *(Business Address Acceptable)*
13130 Burbank Blvd. Sherman Oaks, CA 91401

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit educational organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 21 / 14	\$ 50.00	Reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Found Animals Foundation

ADDRESS *(Business Address Acceptable)*
4235 Sepulveda Blvd., Culver City, CA 90230

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit animal organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 15 / 14	\$ 30.00	Reception
12 / 06 / 14	\$ 20.00	Reception
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Share Our Strength

ADDRESS *(Business Address Acceptable)*
1050-15th St.NW#1100W, Washington, DC 20005

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit child welfare organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 01 / 14	\$ 120.00	Ticket to event
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
KCRW

ADDRESS *(Business Address Acceptable)*
1900 Pico Blvd., Santa Monica, CA 90405

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Radio station

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 18 / 14	\$ 50.00	Seminar & reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Entertainment Software Assn. - E3 Expo

ADDRESS *(Business Address Acceptable)*
575-7th Street NW#300, Washington, DC 20004

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Entertainment Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 12 / 14	\$ 100.00	Ticket to event
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____

SCHEDULE D
Income – Gifts

Name
James B. Clarke

▶ NAME OF SOURCE *(Not an Acronym)*
Southern California Grantmakers

ADDRESS *(Business Address Acceptable)*
1000 N. Alameda St. #230, Los Angeles, CA 90012

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Association of Regional Foundations

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 16 / 14	\$ 75.00	Ticket to conference
11 / 05 / 14	\$ 75.00	Ticket to conference
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
City of Iksan City, South Korea

ADDRESS *(Business Address Acceptable)*
City Hall, Iksan City

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Municipal Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 24 / 14	\$ 750.00	Lodging & meals
11 / 02 / 14	\$ 150.00	Gifts
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Temple Akiba

ADDRESS *(Business Address Acceptable)*
5249 Sepulveda Blvd., Culver City, CA 90230

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Jewish Synagogue

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 03 / 14	\$ 75.00	Yom Kipur ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Wende Museum

ADDRESS *(Business Address Acceptable)*
5741 Buckingham Pkway #E, Culver City, CA 90230

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit Cold War museum

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 08 / 14	\$ 50.00	Reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
IndiCade

ADDRESS *(Business Address Acceptable)*
No address listed

BUSINESS ACTIVITY, IF ANY, OF SOURCE
For profit gaming festival

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 09 / 14	\$ 50.00	Reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Cerrell Associates

ADDRESS *(Business Address Acceptable)*
320 N. Larchmont Blvd, 2nd fl, Los Angeles, CA 90004

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Municipal consulting firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 19 / 14	\$ 50.00	Conference dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE *(Not an Acronym)*
League of California Cities - LA Division
 ADDRESS *(Business Address Acceptable)*
c/o 1400 K Street, Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Municipal Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 04 / 14	\$ 50.00	Holiday reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Modern Parking
 ADDRESS *(Business Address Acceptable)*
1200 Wilshire Blvd. #300, Los Angeles, CA 90017
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Parking services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 15 / 14	\$ 22.00	Lunch mtg
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Apartment Assn. of Greater LA/Beverly Hills
 ADDRESS *(Business Address Acceptable)*
621 S. Westmoreland Ave. Los Angeles, CA 90005
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 05 / 14	\$ 75.00	Dinner meeting
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)*
Culver City Downtown Business Association
 ADDRESS *(Business Address Acceptable)*
9343 Culver Blvd. Culver City, CA 90232
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Business Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 16 / 14	\$ 50.00	Reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: _____