

RECEIVED

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

MAR 30 2015

CITY OF MONTEBELLO
CITY CLERK

Please type or print in ink.

GG

NAME OF FILER (LAST) HADJINIAN (FIRST) JACK (MIDDLE)

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF MONTEBELLO

Division, Board, Department, District, if applicable

CITY COUNCIL

Your Position

COUNCILMEMBER

► 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 Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of MONTEBELLO 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: 7

- 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 03/30/2015
(month, day, year)

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

Jack Hadjinian

▶ NAME OF BUSINESS ENTITY
Royal Dutch Shell Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
Petroleum

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
Disney

GENERAL DESCRIPTION OF THIS BUSINESS
Entertainment

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
KKK & Company

GENERAL DESCRIPTION OF THIS BUSINESS
Investment Firm

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:
09 / 03 / 14 / / 14
ACQUIRED 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 / / 14
ACQUIRED 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)
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IF APPLICABLE, LIST DATE:
 / / 14 / / 14
ACQUIRED 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 / / 14
ACQUIRED DISPOSED

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Jack Hadjinian

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 Century 21 Realty Masters

ADDRESS (Business Address Acceptable)
 830 N. Wilcox Avenue, Montebello, CA 90640

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Real Estate

YOUR BUSINESS POSITION
 Realtor

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 (For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use
 Schedule A-2.)

Sale of _____
 (Real property, car, boat, etc.)

Loan repayment

Commission or Rental Income, list each source of \$10,000 or more

 (Describe)

Other _____
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 (For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use
 Schedule A-2.)

Sale of _____
 (Real property, car, boat, etc.)

Loan repayment

Commission or Rental Income, list each source of \$10,000 or more

 (Describe)

Other _____
 (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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 _____

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

INTEREST RATE TERM (Months/Years)

_____ % None _____

SECURITY FOR LOAN
 None Personal residence

Real Property _____

 Street address

 City

Guarantor _____

Other _____
 (Describe)

Comments: _____

SCHEDULE D
Income – Gifts

Name
Jack Hadjinian

▶ NAME OF SOURCE (Not an Acronym)
Alvarez-Glasman & Colvin

ADDRESS (Business Address Acceptable)
13181 Crossroads Pkwy North, Industry, CA 91746

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 31 / 14	\$ 60.00	Dinner
05 / 19 / 14	\$ 75.00	Dinner
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Mike Anz

ADDRESS (Business Address Acceptable)
104 East Whittier Blvd., Montebello, CA 90640

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 20 / 14	\$ 200.00	Hockey game ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
California Commerce Casino

ADDRESS (Business Address Acceptable)
6131 Telegraph Road, Commerce, CA 90040

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Casino

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 13 / 14	\$ 100.00	Hockey game ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Avant-Garde

ADDRESS (Business Address Acceptable)
3670 West Temple Ave., Ste. 278, Pomona CA 91

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public City Services firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 06 / 14	\$ 75.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Tire Pros

ADDRESS (Business Address Acceptable)
830 N. Wilcox Avenue, Montebello, CA 90640

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Tire sales and car repair

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 18 / 14	\$ 51.00	Soccer game ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Nasa Services, Inc.

ADDRESS (Business Address Acceptable)
1100 South Maple Avenue, Montebello, CA 90640

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Waste Hauler

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 16 / 14	\$ 90.00	Dinner
07 / 10 / 14	\$ 125.00	Golf
09 / 08 / 14	\$ 150.00	Golf

Comments: _____

SCHEDULE D
Income – Gifts

Name
Jack Hadjinian

▶ NAME OF SOURCE (Not an Acronym)
Erik Pulation

ADDRESS (Business Address Acceptable)
321 N. 16th Street

BUSINESS ACTIVITY, IF ANY, OF SOURCE
n/a

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 04 / 14	\$ 400.00	Hockey game ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Jay Nomura

ADDRESS (Business Address Acceptable)
801 Washington Bl., Montebello, CA 90640

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Florist

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 03 / 14	\$ 200.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Jeff Prang

ADDRESS (Business Address Acceptable)
8300 Santa Monica Bl. West Hollywood CA 90069

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 20 / 14	\$ 150.00	Concert Ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Law Offices of Gerard Kassabian

ADDRESS (Business Address Acceptable)
9440 S. Santa Monica Bl. #708, Beverly Hills 90210

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Attorney Firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 24 / 14	\$ 150.00	Golf
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Dr. Brennan Hughes

ADDRESS (Business Address Acceptable)
111 West Beverly Bl., Montebello, CA 90640

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Oral Surgeon

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 25 / 14	\$ 125.00	Golf
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Jason Kachan

ADDRESS (Business Address Acceptable)
1418 E. 18th Street, Los Angeles, CA 90021

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Property Development

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 18 / 14	\$ 75.00	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____