

Date Initial Filing  
MAR 25 2015  
Official Use Only

City Clerk, \_\_\_\_\_  
Deputy City Clerk, \_\_\_\_\_  
(MIDDLE)



STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Haughey Thomas P.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
City of Chino / Successor Agency to the Former Chino Redevelopment Agency  
Division, Board, Department, District, if applicable  
Your Position  
Council Member

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
15 APR - 6 PM 4:2

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

Agency: See Attachment

Position: \_\_\_\_\_

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

- State
- Multi-County San Bernardino and Riverside
- City of Chino
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of San Bernardino
- Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

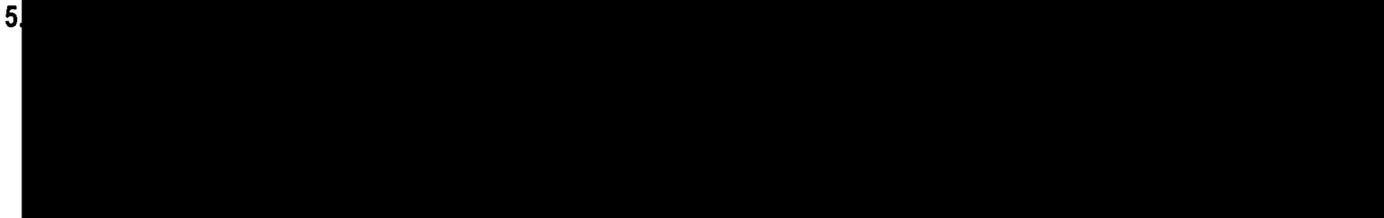
- Annual: The period covered is January 1, 2014, through December 31, 2014.
- or-
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2014.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- The period covered 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: 5

- 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



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

Date Signed 3/25/15  
(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

Thomas P. Haughey

▶ NAME OF BUSINESS ENTITY  
Chino Commercial Bank  
GENERAL DESCRIPTION OF THIS BUSINESS  
Stockholder  
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)  
 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)  
 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  
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\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
ACQUIRED      DISPOSED

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ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
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 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  
 Thomas P. Haughey

▶ NAME OF SOURCE (Not an Acronym)  
 Jimmy Gutierrez, Law Office

ADDRESS (Business Address Acceptable)  
 12616 Central Avenue, Chino, CA 91710

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Attorney

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 10 / 14	\$ 125.00	LA County Fair Prvw
12 / 12 / 14	\$ 125.00	Gift Basket
___ / ___ / ___	\$ _____	_____

▶ 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)  
 Watson Land Company

ADDRESS (Business Address Acceptable)  
 22010 Wilmington Avenue, Carson, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Builder

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 09 / 14	\$ 232.00	Brunch
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)  
 Planes of Fame Air Museum

ADDRESS (Business Address Acceptable)  
 7000 Merrill Avenue, Chino, CA 91710

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 04 / 14	\$ 120.00	Air Show Tickets
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: \_\_\_\_\_

Council Member Tom Haughey is an Alternate Board Member for the following entities:

Chino Basin Desalter Authority – San Bernardino County and Riverside County.

Water Facilities Authority – San Bernardino County.

Successor Agency to the Former Chino Redevelopment Agency