

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

Date Initial Filing  
Filed  
Only  
RECEIVED  
FEB 25 2015  
By BTG (MIDDLE)

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Salas Rodolfo (Rudy)

PR

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
State of California Assembly  
Division, Board, Department, District, if applicable  
District 32  
Your Position  
Assembly Member

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

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

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
2015 FEB 25 PM 4 27

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

- State
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- 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 \_\_\_\_/\_\_\_\_/\_\_\_\_
- Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_
- 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.

4. Schedule Summary

- Check applicable schedules or "None." ► Total number of pages including this cover page: 3
- 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

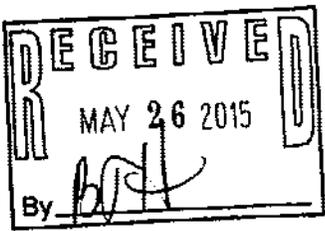


I certify under penalty of perjury under the laws of the State of California that the information herein and in any attached schedules is true and complete. I acknowledge this is a

Date Signed 2-15-15 Signature \_\_\_\_\_  
(month, day, year)







SCHEDULE D  
Income - Gifts  
2015 MAY 27 PM 2:10

CALIFORNIA FORM 700  
FAIR POLITICAL PRACTICES COMMISSION  
AMENDMENT

RM

▶ NAME OF SOURCE (Not an Acronym)  
California Democratic Party  
ADDRESS (Business Address Acceptable)  
1830 Ninth Street, Sacramento, CA 95811  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Political Party

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 20 / 14</u>	<u>\$ 67.73</u>	<u>Food &amp; drink</u>
<u>   /   /   </u>	<u>   \$   </u>	<u>(Luncheon)</u>
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>

▶ 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)
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>

▶ 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)
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>

▶ NAME OF SOURCE (Not an Acronym)  
\_\_\_\_\_  
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\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

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<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>

▶ 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)
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>
<u>   /   /   </u>	<u>   \$   </u>	<u>   </u>

**Filer's Verification**

Print Name Rodolfo (Rudy) Salas

Office, Agency or Court State of California Assembly

Statement Type  2014/2015 Annual  Assuming  Leaving  
 2014 Annual (yr)  Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 5-26-15

Filer's Signature (c)(1)

Comments: Amended to include gift left off original report, gift information received - 4-30-2015