

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Jackson Hannah-Beth

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Senate

Division, Board, Department, District, if applicable

District 19

Your Position

Senator

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

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

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
2015 MAR -2 PM 1:35

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

- State  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of \_\_\_\_\_
- City 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: 10

- 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]

I have used all reasonable diligence in preparing this statement. I have reviewed this herein and in any attached schedules is true and complete. I acknowledge this is a

I certify under penalty of perjury under the laws of the State of California that

Date Signed February 28, 2015 Signature

# 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

Hannah-Beth Jackson

▶ NAME OF BUSINESS ENTITY  
American Eagle Outfitters

GENERAL DESCRIPTION OF THIS BUSINESS  
Apparel

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      12/12/14  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Digital Realty Trust, Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Data Center

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      11/4/14  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Goldcorp Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Gold Producer

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      12/12/14  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
AT&T

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      3/24/14  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Intel Corp

GENERAL DESCRIPTION OF THIS BUSINESS  
Computers/Semi-Conductor Maker

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      7/14/14  
ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Raytheon Corp.

GENERAL DESCRIPTION OF THIS BUSINESS  
Defense/Security Technology

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      8/11/14  
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  
Hannah-Beth Jackson

▶ NAME OF BUSINESS ENTITY  
Boeing Company

GENERAL DESCRIPTION OF THIS BUSINESS  
Aerospace Manufacturer

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  
Hospira Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Medical 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  
Kohls

GENERAL DESCRIPTION OF THIS BUSINESS  
Retail Apparel

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  
Apple Inc.

GENERAL DESCRIPTION OF THIS BUSINESS  
Technology

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 Electric

GENERAL DESCRIPTION OF THIS BUSINESS  
Multinational Conglomerate

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  
Merck & Company

GENERAL DESCRIPTION OF THIS BUSINESS  
Pharmaceutical Researcher/Developer

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.*

<b>CALIFORNIA FORM 700</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name Hannah-Beth Jackson

▶ **NAME OF BUSINESS ENTITY**  
Microsoft Corp.

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**GENERAL DESCRIPTION OF THIS BUSINESS**  
Computer/Software Technology

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**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**  
Verizon Communications

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**GENERAL DESCRIPTION OF THIS BUSINESS**  
Telecommunications

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**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**  
Mosaic Co.

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**GENERAL DESCRIPTION OF THIS BUSINESS**  
Phosphate & Potash Products

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**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**  
Washington Federal

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**GENERAL DESCRIPTION OF THIS BUSINESS**  
Finance/Banking

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**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**  
ABB Ltd.

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**GENERAL DESCRIPTION OF THIS BUSINESS**  
Automation Technologies

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**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**  
Verify Me

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**GENERAL DESCRIPTION OF THIS BUSINESS**  
Data Security

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**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

Hannah-Beth Jackson

▶ NAME OF BUSINESS ENTITY  
Laser Lock

GENERAL DESCRIPTION OF THIS BUSINESS  
Anti-Counterfeit/Identity Theft Technology

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  
Cascade Investment Capital

GENERAL DESCRIPTION OF THIS BUSINESS  
Real Estate Acquisition & Management

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  
Carnival Corp.

GENERAL DESCRIPTION OF THIS BUSINESS  
Multinational Cruise Company

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:  
10 / 17 / 14    \_\_\_\_/\_\_\_\_/14  
ACQUIRED                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
Data Treasury

GENERAL DESCRIPTION OF THIS BUSINESS  
Data Storage

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  
Telefonica Brasil

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:  
8 / 5 / 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)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Hannah-Beth Jackson
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▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
<b>NAME OF SOURCE OF INCOME</b> Cascade Investment Capital	<b>NAME OF SOURCE OF INCOME</b> _____
<b>ADDRESS (Business Address Acceptable)</b> 1224 Coast Village Circle, Ste. 11, Santa Barbara	<b>ADDRESS (Business Address Acceptable)</b> _____
<b>BUSINESS ACTIVITY, IF ANY, OF SOURCE</b> Real Estate Acquisition & Management	<b>BUSINESS ACTIVITY, IF ANY, OF SOURCE</b> _____
<b>YOUR BUSINESS POSITION</b> Limited Partner	<b>YOUR BUSINESS POSITION</b> _____
<b>GROSS INCOME RECEIVED</b> <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	<b>GROSS INCOME RECEIVED</b> <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
<b>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</b> <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)  <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)  <input type="checkbox"/> Sale of _____ <i>(Real property, car, boat, etc.)</i>  <input type="checkbox"/> Loan repayment  <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <i>(Describe)</i> <input checked="" type="checkbox"/> Other Distributions _____ <i>(Describe)</i>	<b>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</b> <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)  <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)  <input type="checkbox"/> Sale of _____ <i>(Real property, car, boat, etc.)</i>  <input type="checkbox"/> Loan repayment  <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <i>(Describe)</i> <input type="checkbox"/> Other _____ <i>(Describe)</i>

**▶ 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:

<b>NAME OF LENDER*</b> _____ <b>ADDRESS (Business Address Acceptable)</b> _____ <b>BUSINESS ACTIVITY, IF ANY, OF LENDER</b> _____ <b>HIGHEST BALANCE DURING REPORTING PERIOD</b> <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	<b>INTEREST RATE</b> _____% <input type="checkbox"/> None  <b>SECURITY FOR LOAN</b> <input type="checkbox"/> None <input type="checkbox"/> Personal residence  <input type="checkbox"/> Real Property _____ <i>Street address</i> _____ <i>City</i>  <input type="checkbox"/> Guarantor _____  <input type="checkbox"/> Other _____ <i>(Describe)</i>
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**Comments:** \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
HANNAH BETH JACKSON

▶ NAME OF SOURCE (Not an Acronym)  
 California Democratic Party

ADDRESS (Business Address Acceptable)  
 1401 21st St, Suite 200

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 n/a

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 04 / 14	\$ 80.55	Food & Beverage
02 / 05 / 14	\$ 80.55	Food & Beverage
11 / 06 / 14	\$ 68.45	Food & Beverage

▶ NAME OF SOURCE (Not an Acronym)  
 California Judges Association

ADDRESS (Business Address Acceptable)  
 925 L Street, Suite 1250 Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Association of CA Judges

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 02 / 14	\$ 83.09	Food & Beverage
06 / 02 / 14	\$ 306.28	Award Plaque

▶ NAME OF SOURCE (Not an Acronym)  
 EdVoice Institute

ADDRESS (Business Address Acceptable)  
 1107 9th Street, Suite 680 Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Research Institute

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 13 / 14	\$ 74.64	Food & Beverage

▶ NAME OF SOURCE (Not an Acronym)  
 Kevin de Leon for Senate

ADDRESS (Business Address Acceptable)  
 777 South Figueroa Street, Suite 4050, LA 90017

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 n/a

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 30 / 14	\$ 117.83	Dinner

▶ NAME OF SOURCE (Not an Acronym)  
 CA Applicants Attorneys Association

ADDRESS (Business Address Acceptable)  
 1303 J St., Suite 420, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 n/a

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 12 / 14	\$ 39.99	Lunch

▶ NAME OF SOURCE (Not an Acronym)  
 California Foundation for Education & Commerce

ADDRESS (Business Address Acceptable)  
 1215 K Street, Suite 1400, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 n/a

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 26 / 14	\$ 234.72	Food & Beverage

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

Name  
HANNAH-BETH JACKSON

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)  
National Alliance for Caregiving  
 ADDRESS (Business Address Acceptable)  
4720 Montgomery Lane, Ste 205,  
 CITY AND STATE  
Bethesda MD

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE  
n/a

DATE(S): 03 / 11 / 14 AMT: \$ 154.00  
(if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide Description \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
Government of Spain  
 ADDRESS (Business Address Acceptable)  
Paseo de la Castellana, 14-2nd Floor  
 CITY AND STATE  
Madrid, Spain

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE  
n/a

DATE(S): 09 / 16 / 14 - 09 / 22 / 14 AMT: \$ 409.00  
(if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide Description  
Participated in a Senate-led international relations trip

▶ NAME OF SOURCE (Not an Acronym)  
Stanford Arthur & Toni Rembe Rock Center  
 ADDRESS (Business Address Acceptable)  
559 Nathan Abbott Way  
 CITY AND STATE  
Stanford, CA

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE  
University

DATE(S): 11 / 20 / 14 - 11 / 21 / 14 AMT: \$ 873.70  
(if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide Description \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 CITY AND STATE  
 \_\_\_\_\_

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

DATE(S): \_\_\_\_\_ AMT: \$ \_\_\_\_\_  
(if gift)

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel

Other - Provide Description \_\_\_\_\_

Comments: \_\_\_\_\_