2014

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
Official Use Only
MAY 11 2015

RECEIVED FAIR POLITICAL PRACTICES COMMISSION 2015 MAY 13 AM 11:14

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Wieckowski	Robert	Anthony

P.R

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
California State Senate

Division, Board, Department, District, if applicable

Your Position
Senator

► 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)*

- [x] State
- [ ] Multi-County _____
- [ ] City of _____
- [ ] Judge or Court Commissioner (Statewide Jurisdiction)
- [ ] County of _____
- [ ] Other _____

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

- [x] **Annual:** The period covered is January 1, 2013, through December 31, 2013.
  -or-
  The period covered is ___/___/_____, through December 31, 2013.
- [ ] **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, 2013, 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:*** _____

- [ ] **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
- [x] **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

Date Signed 05/11/2015 (month, day, year)

Signatur

SCHEDULE D
Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

▶ 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

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 20 / 14	$ 68	Luncheon
/ /	$	
/ /	$	

▶ 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)*
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)*
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)*
ADDRESS *(Business Address Acceptable)*
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	$	
/ /	$	
/ /	$	

Filer's Verification

Print Name Robert Wieckowski

Office, Agency or Court California State Senate

Statement Type ☒ 2013/2014 Annual ☐ Assuming ☐ Leaving
☐ _____ (yr) Annual ☐ 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 05/11/2015

Filer's Signature (c)(1)

Comments:

1342

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
2015 MAR -2 PM 3:43

Date Initial Filing Received
Official Use Only
MAR 2 2015

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Wieckowski	Robert	Anthony

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
California State Senate

Division, Board, Department, District, if applicable

Your Position
Senator

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

Agency: _____ Position: _____

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- [ ] **Schedule C** - *Income, Loans, & Business Positions* – schedule attached
- [x] **Schedule D** - *Income – Gifts* – schedule attached
- [x] **Schedule E** - *Income – Gifts – Travel Payments* – schedule attached

-or-

- [ ] **None** - *No reportable interests on any schedule*

5. (c)(1)

(c)(1)

I certify under penalty of perjury under the laws of the State of Californ

Date Signed 3/2/14
(month, day, year)

Si
(File the originally signed statement with your filing official.)

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

Robert Wieckowski

<BLUE> is a required field

NAME OF BUSINESS ENTITY	GENERAL DESCRIPTION OF THIS BUSINESS ACTIVITY	FAIR MARKET VALUE (Select from drop down list)	NATURE OF INVESTMENT (Select from drop down list. If "other," describe)	IF APPLICABLE, LIST DATE (mm/dd/2014) ACQUIRED	DISPOSED
Crusader, LIC	Financial Management Group	$10,001 - $100,000	Other		

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

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SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

<BLUE> is a required field

** Select from drop down list*

1. Business Entity or Trust							2. Gross Income Received	3. Sources of Income of $10,000 or more	4. Investments or Interests in Real Property Held by the Business Entity or Trust *(Use a separate line for each investment or real property interest.)*					
NAME AND ADDRESS OF BUSINESS ENTITY OR TRUST *(Business Address Acceptable)* (If Trust, go to 2)	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	FAIR MARKET VALUE*	LIST DATE ACQUIRED OR DISPOSED (mm/dd/2014)	A or D	NATURE OF INVESTMENT (if "other," describe)*	YOUR BUSINESS POSITION	INCLUDE YOUR PRO RATA SHARE OF GROSS INCOME TO ENTITY/TRUST*	LIST SINGLE SOURCES OF INCOME OF $10,000 OR MORE	INVESTMENT-BUSINESS ENTITY/NAME, AND BUSINESS ACTIVITY	REAL PROPERTY-LIST PRECISE LOCATION OF REAL PROPERTY	FAIR MARKET VALUE*	LIST DATE ACQUIRED OR DISPOSED (mm/dd/2014)	A or D	NATURE OF INTEREST (if "other," describe)*
Law Office of Robert A. Wieckowski, 39510 Paseo Padre Pkwy Fremont, CA 94538	Legal Services	$10,001 - $100,000			Legal Corp.	President	$1,001-$10,000	Martha G. Bronitsky - Chapter 13 Trustee						

Schedule D
Income - Gifts

CALIFORNIA FORM **700**
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Name
Robert Wieckowski

<BLUE> is a required field

NAME OF SOURCE	ADDRESS OF SOURCE (Business Address Acceptable)	ZIP CODE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
TechAmerica	1400 K Street, Suite 201 Sacramento, CA	95814	High Tech Industry	1/21/2014	$ 53.72	Food & Drink
California Democratic Party	1401 21st Street, #200, Sacramento, CA	95811	Democratic Party	02/04/14	$ 151.27	Food & Drink
CA Professional Firefighters	1880 Creekside Oaks Dr. Sacramento, CA	95833	Public Safety	03/05/14	$ 151.27	firefighters helmet
Cargill	7220 Central Avenue Newark Ca	94560	None	3/7/2014	$ 50.00	Coffeetable Book - Saltscapes
AFSCME	1121 L Street, Suite 904 Sacramento, CA	95814	None	03/24/14	$ 109.57	Food & Drink
Consumer Attorneys of CA	770 L Street Suite 1200 Sacramento,CA	95814	Attorneys	05/06/14	$ 33.56	food & drink
Kaiser Foundation Health Plan, Inc.	2401 Merced Street, Suite 100 San Leandro, CA	94577	Healthcare	05/16/14	$ 77.00	food & drink
San Fracisco 49ers	4949 Marie P. DeBartolo Way Santa Clara CA	95054	None	07/17/14	$ 100.00	food & drink
San Fracisco 49ers	4949 Marie P. DeBartolo Way Santa Clara CA	95054	None	07/19/14	$ 750.00	Food & Drink/ Concert [Reimbursed $410]
CA Foundation for Commerce & Education	1215 K Street, Suite 1400 Sacramento, CA	95814	Business	07/27/14	$ 234.72	Food & Drink
East Bay Regional Park District	2950 Peralta Oaks Court Oakland, CA	94605	None	08/22/14	$ 45.60	Food & Drink
TechAmerica	3500 Lacey Road, Suite 100 Downers Grove, Il	60515	High Tech Industry	10/02/14	$ 113.73	Food & Drink
PG&E	1415 L Street, Suite 280 Sacramento CA	95814	Utility	10/06/14	$ 147.63	Baseball tickets
CPTA	2880 GATEWAY OAKS DRIVE, SUITE 140 SACRAMENTO, CA	95833	Healthcare	10/28/14	$ 108.95	Food & Drink
AT&T	1215 K Street, Suite 1800 Sacramento, CA	95814	Telecommunications	10/28/15	$ 493.72	Ticket to game [Reimbursed $53.72]
CA Dem Party	1830 9th Street Sacramento, CA	95811	Democratic Party	11/06/14	$ 68.45	Food & Drink
CA Correctional Peace Officers Assn.	755 Riverpoint Drive West Sacramento, CA	95605	Public Safety	11/17/14	$ 177.46	Food & Drink
Kevin de Leon for Senate 2014	777 S. Figueroa Street, Suite 4050 Los Angeles CA	90017	President Pro Tempore	11/30/14	$ 235.66	Food & Dinner

SCHEDULE E

Income - Gifts
Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Robert Wieckowski

<BLUE> is a required field

- You must 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 gift limit, but may result in a disqualifying conflict of interest.

NAME AND ADDRESS OF SOURCE (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3)	DATE(S) (mm/dd/yy) (If gift)	AMOUNT	TYPE OF PAYMENT (Gift or Income)	MADE A SPEECH/ PARTICIPATED IN A PANEL	DESCRIPTION
Independent Voter Project - 101 West Broadway, Suite 1460 San Diego CA 92101	Public Policy	Yes	11/16/2014 - 11/20/2014	$ 1,925.00	Gift	Y	Made a Speech/Partcipated in a panel Business and Leadership Policy Conference