CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

EB

COVER PAGE

Date Received
Official Use Only

SCO-PERSONNEL
HUMAN RESOURCES

2011 MAR -1 AM 9:44

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
CHIANG	JOHN	

1. Office, Agency, or Court

Agency Name: STATE CONTROLLER'S OFFICE

Division, Board, Department, District, if applicable

Your Position: CALIFORNIA STATE CONTROLLER

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

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

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

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

- [x] **Annual:** The period covered is January 1, 2010, through December 31, 2010.

  -or-

  The period covered is ___/___/___, through December 31, 2010.

- [ ] **Assuming Office:** Date ___/___/___

- [ ] **Candidate:** Election Year _____ Office sought, if different than Part 1: _____

- [ ] **Leaving Office:** Date Left ___/___/___ *(Check one)*
  - ○ The period covered is January 1, 2010, 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:** 15

- [ ] **Schedule A-1** - *Investments* – schedule attached
- [x] **Schedule A-2** - *Investments* – schedule attached
- [ ] **Schedule B** - *Real Property* – schedule attached
- [x] **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. V

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 2/28/11 *(month, day, year)* **Signature**

SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: John Chiang

▶ 1. BUSINESS ENTITY OR TRUST

Name: BUNDLE UP JOY

(d)(5)

Address *(Business Address Acceptable)*

Check one
☐ Trust, *go to 2* ☒ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY: BABY CLOTHING

FAIR MARKET VALUE
☒ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☒ SPOUSE'S BUSINESS Other

YOUR BUSINESS POSITION: NONE

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ $0 - $499
☐ $500 - $1,000
☒ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold ____ Yrs. remaining ☐ Other ____

☐ Check box if additional schedules reporting investments or real property are attached

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▶ 1. BUSINESS ENTITY OR TRUST

Name

Address *(Business Address Acceptable)*

Check one
☐ Trust, *go to 2* ☐ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☐ ____ Other

YOUR BUSINESS POSITION

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold ____ Yrs. remaining ☐ Other ____

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: JOHN CHIANG

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME: DUNN EDWARDS

ADDRESS *(Business Address Acceptable)*: 4885 E. 52nd PLACE, LOS ANGELES, CA 90058

BUSINESS ACTIVITY, IF ANY, OF SOURCE: PAINT

YOUR BUSINESS POSITION: MARKETING

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
- ☐ Loan repayment
- ☐ Partnership
- ☐ Sale of _____ *(Property, car, boat, etc.)*
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*
- ☐ 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
- ☐ Loan repayment
- ☐ Partnership
- ☐ Sale of _____ *(Property, car, boat, etc.)*
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*
- ☐ 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: _____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN
- ☐ None
- ☐ Personal residence
- ☐ Real Property _____ *Street address*
- _____ *City*
- ☐ Guarantor _____
- ☐ Other _____ *(Describe)*

Comments:

CALIFORNIA FORM **700**
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Name: John Chiang

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Bet Tzedek
ADDRESS (Business Address Acceptable): 145 S. Fairfax Avenue, #200 Los Angeles, CA 90036
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal Services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/13/10	$ 150	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Los Angeles County Federation of Labor
ADDRESS (Business Address Acceptable): 2130 James M. Woods Bl. Los Angeles 90006
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/15/10	$ 70	Martin Luther King Breakfast
3/9/10	$ 20	Legislative Reception
/ /	$	

▶ NAME OF SOURCE: Morali Delavella
ADDRESS (Business Address Acceptable): 1531 12th St., #105 Santa Monica 90401
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Food

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/15/10	$ 370.00	2 Lakers Tickets
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Consumer Attorneys Association of Los Angeles
ADDRESS (Business Address Acceptable): 800 W. 6th St. #700 Los Angeles, CA 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/23/10	$ 110	Installation Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: American Israel Public Affairs Committee
ADDRESS (Business Address Acceptable): 6310 San Vicente Bl #275, Los Angeles, CA 90048
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Public Affairs

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1/24/10	$ 110	Annual Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: AEG
ADDRESS (Business Address Acceptable): 800 W. Olympic Bl. #305 Los Angeles 90015
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Sports and Entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/11/10	$ 97*	LA Kings Tickets,
/ /	$	Reception
/ /	$	

Comments: * I delivered congratulatory remarks for black history month.

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SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Agribusiness President's Council
ADDRESS (Business Address Acceptable): 1521 I St., Sacramento, 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/17/10	$ 41	Reception
/ /	$	
/ /	$	

▶ NAME OF SOURCE: California Cotton Ginner and Growers Association
ADDRESS (Business Address Acceptable): 1785 N. Fine Ave., Fresno 93727
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/17/10	$ 45.00 *	Cotton Towels
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Japanese American Bar Association
ADDRESS (Business Address Acceptable): P.O. Box 86812, Los Angeles 90086
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/19/10	$ 110.00	Installation Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Central City Optimist Club
ADDRESS (Business Address Acceptable): 28634 S. Western Ave., #462, Rancho Palos Verdes 90275
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Service Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/20/10	$ 50	Banquet Ticket - Wife
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Fox Entertainment Group
ADDRESS (Business Address Acceptable): P.O. Box 900, Beverly Hills 90213
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/21/10	$ 20	Movie Tickets
6/30/10	$ 31.98	Movie Ticket - Wife
/ /	$	

▶ NAME OF SOURCE: Valley Industry and Commerce Association
ADDRESS (Business Address Acceptable): 5121 Van Nuys Bl. #203 Sherman Oaks 91403
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Business Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/26/10	$ 45	State Officeholders Dinner
6/17/10	$ 63	Hall of Fame Dinner
/ /	$	

Comments: * Towels donated to ACC Nursing Home after 30 days of receipt.

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SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Hong Kong Association of Southern California
ADDRESS (Business Address Acceptable): 350 S. Figueroa #139, Los Angeles 90071
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Cultural

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2/27/10	$ 90*	Chinese New Year Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: California Science Foundation
ADDRESS (Business Address Acceptable): 700 Exposition Drive, Los Angeles 90037
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Science Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3/20/10	$ 85	Ecosystems Grand Opening Gala
/ /	$	
/ /	$	

▶ NAME OF SOURCE: American Jewish Committee
ADDRESS (Business Address Acceptable): 9911 W. Pico Bl., #1602 Los Angeles 90035
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3/17/10	$ 125	Awards Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Southern California Chinese Lawyers Association
ADDRESS (Business Address Acceptable): P.O. Box 861959 Terminal Annex, Los Angeles 90086
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3/26/10	$ 100	Installation Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: National Association of Women Business Owners - Los Angeles
ADDRESS (Business Address Acceptable): 900 Wilshire Bl #404 Los Angeles 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Business

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3/19/10	$ 150	Luncheon
/ /	$	
/ /	$	

▶ NAME OF SOURCE: University of South Florida Foundation
ADDRESS (Business Address Acceptable): 4202 East Fowler Ave, ALC 100, Tampa, Florida 33620
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/11/10	$ 50	Brunch
/ /	$	
/ /	$	

Comments: *I gave congratulatory remarks.

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SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: United Nurses Association of California
ADDRESS (Business Address Acceptable): 955 Overland Court, #150, San Dimas 91773
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/16/10	$ 37.67	Reception
12/10/10	$ 36.50	Open House and
/ /	$	Retirement Celebration

▶ NAME OF SOURCE: Paul Arne
ADDRESS (Business Address Acceptable): 556 S. Fair Oaks Avenue, Suite #101A, #468, Pasadena 91105
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Consultant

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/17/10	$ 125	California Democratic
/ /	$	Party Dinner Ticket
/ /	$	

▶ NAME OF SOURCE: Lynn Fukuhara-Arthurs
ADDRESS (Business Address Acceptable): 10153 -1/2 Riverside Dr, #111, Toluca Lake 91602
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/19/10	$ 400.00	Awards Dinner
/ /	$	Ticket - East West
/ /	$	Players

▶ NAME OF SOURCE: Yucaipa Companies
ADDRESS (Business Address Acceptable): 9130 W. Sunset Blvd., Los Angeles 90069
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Investments

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/20/10	$ 50	Annual Meeting -
/ /	$	lunch
/ /	$	

▶ NAME OF SOURCE: Steve and Heather Mnuchin
ADDRESS (Business Address Acceptable): 887 East Walnut, Pasadena 91101
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Financial

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/25/10	$ 175.00	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Milken Institute
ADDRESS (Business Address Acceptable): 1250 Fourth Street, Santa Monica 90401
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Educational

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4/26/10	$ 75	lunch
4/27/10	$ 50*	breakfast
/ /	$	

Comments: *Breakfast sponsored by Ewing Marion Kaufman Foundation, 4801 Rockhill Road, Kansas City, Missouri 64110, Financial Education Nonprofit. I was asked to comment about California's fiscal condition.

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Name: John Chiang

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: California Latino Legislative Caucus
ADDRESS (Business Address Acceptable): State Capitol Room 5100, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legislative

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/3/10	$ 53.60*	Latino Spirit Awards Reception
/ /	$	
/ /	$	

▶ NAME OF SOURCE: California Women for Agriculture
ADDRESS (Business Address Acceptable): P.O. Box 313, Kingsburg, CA 93631
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/4/10	$ 80	Reception
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Hollenbeck Police Business Council
ADDRESS (Business Address Acceptable): 2015 East First Street, Los Angeles, CA 90033
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Youth Services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/8/10	$ 80.00	Family of the Year Award Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: AHMC Health Foundation
ADDRESS (Business Address Acceptable): 438 W. Las Tunas Drive, San Gabriel, CA 91776
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Healthcare Services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/8/10	$ 83.00	Gala - Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Orange County Asian Bar Association
ADDRESS (Business Address Acceptable): 6789 Quail Hill Parkway, #204 Irvine, CA 92603
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/13/10	$ 85	Installation Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: CalChamber
ADDRESS (Business Address Acceptable): 1215 K Street, #1400, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Business

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/17/10	$ 64.07	Dinner
/ /	$	
/ /	$	

Comments: * Value for two tickets. I did not use the second ticket.

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Name: John Chiang

SCHEDULE D
Income – Gifts

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Victor Park	650 Fifth Avenue, New York, NY 10185	Finance	5/18/10	$150	Dinner
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Pres. William J. Clinton	55 West 125th St. New York, NY 10027	Public Policy	5/19/10	$125 (est)*	Dinner
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
UCLA Burkle Center for International Relations	11353 Bunch Hall, Box 951487, Los Angeles, CA 90095	Education	5/24/10	$68	Dinner
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Global Green USA	2218 Main St., 2nd Flr., Santa Monica, CA 90405	Environment	6/12/10	$25	Reception
			6/12/10	$75	Dinner
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Public Counsel	P.O. Box 76900, Los Angeles, CA 90076	Legal	6/16/10	$100.00	William O. Douglas
			/ /	$	Award dinner
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Maria Chen	7175 Sharon Drive, San Jose, CA 95129	Auto	6/19/10	$120.00	Chamber Dinner
			/ /	$	
			/ /	$	

Comments: * Assistant said it was a social dinner, and there was no gift value. Group appetizers, salad, fish, skipped dessert, diet coke. Invitation came from Pres. Clinton's office. Hosts could include others.

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Name: John Chiang

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Seyfarth Shaw
ADDRESS (Business Address Acceptable): 333 S. Hope St, #3900, Los Angeles, CA 90071
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
6/24/10	$135.00	Los Angeles County Bar Association Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Alta Med
ADDRESS (Business Address Acceptable): 500 Citadel Drive, #490, Los Angeles, CA 90040
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Health Care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/9/10	$60	Ticket to fundraiser
/ /	$	
/ /	$	

▶ NAME OF SOURCE: California Labor Federation
ADDRESS (Business Address Acceptable): 600 S. Grand Ave, #410, Oakland, CA 94610
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/13/10	$35*	Lunch
12/6/10	$16.44	Reception
/ /	$	

▶ NAME OF SOURCE: Steve Zahn
ADDRESS (Business Address Acceptable): 2126 W. 234th Street, Torrance, CA 90501
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/11/10	$70	Dodger Ticket
7/11/10	$75	Food
/ /	$	

▶ NAME OF SOURCE: California Teachers Association
ADDRESS (Business Address Acceptable): 1118 10th Street, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8/1/10	$43.99	Reception**
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Taiwanese American Citizens League
ADDRESS (Business Address Acceptable): 3001 Walnut Grove #7, Rosemead, CA 91770
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Cultural, Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8/7/10	$100.00	25th Anniversary Dinner - Wife's Ticket
/ /	$	
/ /	$	

Comments: * I gave a speech after the lunch. ** I gave remarks about the State's fiscal condition.

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SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Project by Project Southern California
ADDRESS (Business Address Acceptable): 2355 Westwood Blvd, #246, Los Angeles 90064
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Charitable

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8/14/10	$ 200.00*	Reception - Me,
/ /	$	wife given a ticket
/ /	$	

▶ NAME OF SOURCE: Long Term Care Workers Service Employees International Union - United
ADDRESS (Business Address Acceptable): 2515 Beverly Bl., Los Angeles, CA 90057
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/3/10	$ 69.00	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Chinese American Museum
ADDRESS (Business Address Acceptable): 125 Paseo de la Plaza, #300, Los Angeles, CA 90012
BUSINESS ACTIVITY, IF ANY, OF SOURCE: History, Culture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/19/10	$ 60	Banquet
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Kevin Chen
ADDRESS (Business Address Acceptable): 35 West Valley Blvd., Alhambra, CA 91801
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Food

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/19/10	$ 70	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Miguel Contreras Foundation
ADDRESS (Business Address Acceptable): 2404 Wilshire Bl., #5A, Los Angeles, CA 90057
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/21/10	$ 95**	Reception, Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: United Chamber of Commerce
ADDRESS (Business Address Acceptable): 5121 Van Nuys Bl., #208 Sherman Oaks, CA 91403
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Business

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9/22/10	$ 50	Luncheon
/ /	$	
/ /	$	

Comments: * I presented a certificate ** I did not have dinner.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: John Chiang

SCHEDULE D
Income – Gifts

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Korean Consul General Los Angeles	3243 Wilshire Blvd, Los Angeles, CA 90010	International Affair's	10/1/10	$50	National Day Reception
Chinese Club of San Marino	2425 Huntington Dr., San Marino, CA 91108	Cultural	11/6/10	$100*	Dinner Ticket for wife
Central Health Plan	1540 Bridgegate Dr., Diamond Bar, CA 91765	Health care	11/13/10	$67.20	Newspaper AA
Mandy Kajioka	3240 Arden Way, Sacramento, CA 95825	Law Enforcement	11/17/10	$125	Kings Ticket and dinner
Stewart Kim	11111 Santa Monica Bl, #910, Los Angeles, CA 90025	Finance	11/29/10	$99	Dinner
Travis Smiley	4434 Crenshaw Bl., Los Angeles, CA 90043	Media	12/2/10	$200	Dinner - me and my wife

Comments: * I was keynote speaker.

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name: John Chiang

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Allied Physicians IPA
ADDRESS (Business Address Acceptable): 1668 S. Garfield Ave, 2nd Flr. Alhambra, CA 91801
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Health Care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/11/10	$ 85	Holiday Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: San Francisco Business Times
ADDRESS (Business Address Acceptable): 275 Battery St., #940, San Francisco, CA 94111
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Media

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/3/10	$ 65	Breakfast Event
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Jordan Kaplan
ADDRESS (Business Address Acceptable): 808 Wilshire Bl #200, Santa Monica, CA 90401
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/9/10	$ 53	lunch
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Lee Haynes
ADDRESS (Business Address Acceptable): 2013 N. Cirby Way, Roseville, CA 95661
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Law Enforcement

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/15/10	$ 300	Lakers Jersey
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Richard McWhorter
ADDRESS (Business Address Acceptable): 225 S. Lake Ave. Pasadena, CA 91101
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Financial

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7/27/10	$ 100	Dinner
12/16/10	$ 100	Dinner
/ /	$	

▶ NAME OF SOURCE: Robert Lin
ADDRESS (Business Address Acceptable): 18725 E. Gale Ave. #140 City of Industry, CA 91748
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Doctor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/22/10	$ 150* (est)	Clippers Ticket
/ /	$	and dinner
/ /	$	

Comments: * Multiple inquiries about gift value were made.

CALIFORNIA FORM **700**
~~FAIR POLITICAL PRACTICES COMMISSION~~

Name: John Chiang

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE
Garfield Medical Center
ADDRESS (Business Address Acceptable)
525 N. Garfield Ave. Monterey Park, CA 91754
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Health Care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/12/10	$ 150	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE
The California Museum for History, Women and the Arts
ADDRESS (Business Address Acceptable)
1200 O Street, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Educational

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/14/10	$ 50* (est)	Hall of Fame Gala
/ /	$	
/ /	$	

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

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

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

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

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

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

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

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

Comments: * Multiple inquiries about gift value have been made.

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

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
John Chiang

- **Reminder – you must mark the gift or income box.**
- **You are not required to report income from government agencies.**
- **You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the $420 gift limit.**

► NAME OF SOURCE
Aspen Institute
ADDRESS *(Business Address Acceptable)*
1000 North Third Street
CITY AND STATE
Aspen, CO 81611
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☒ 501 (c)(3)
Educational
DATE(S): 7/5/10 - 7/6/10 *(If applicable)* AMT: $ 550.00
TYPE OF PAYMENT: (must check one) ☒ Gift ☐ Income
DESCRIPTION: Airline Ticket to Speak at Conference. Ticket was not used; travel cancelled because of state budget crisis

► NAME OF SOURCE
ADDRESS *(Business Address Acceptable)*
CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)
DATE(S): ___/___/___ - ___/___/___ *(If applicable)* AMT: $
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION:

► NAME OF SOURCE
ADDRESS *(Business Address Acceptable)*
CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)
DATE(S): ___/___/___ - ___/___/___ *(If applicable)* AMT: $
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION:

► NAME OF SOURCE
ADDRESS *(Business Address Acceptable)*
CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)
DATE(S): ___/___/___ - ___/___/___ *(If applicable)* AMT: $
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION:

Comments: