CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
2012 MAR -1 PM 4:22

RECEIVED
Date Received
Official Use Only
MAR 1 2012
BY:

EB

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Butler	Betsy	Virginia

1. Office, Agency, or Court

Agency Name: State of California

Division, Board, Department, District, if applicable: Assemblymember, 53 District

Your Position: Assemblymember

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

Agency: Santa Monica Bay Restoration Comm. Position: Governing Brd. Mbr.

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, 2011, through December 31, 2011.
  -or-
  The period covered is ___/___/_____, through December 31, 2011.
- [ ] **Assuming Office:** Date assumed ___/___/_____
- [ ] **Candidate:** Election Year _____ Office sought, if different than Part 1: _____
- [ ] **Leaving Office:** Date Left ___/___/_____ *(Check one)*
  - ○ The period covered is January 1, 2011, 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:*** 9

- [ ] **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 this is

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

Date Signed 3·1·12 *(month, day, year)* **Signatu**

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name Betsy Butler

SCHEDULE B
Interests in Real Property
(Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
4350 Via Dolce

CITY Marina del Rey, Ca

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

IF APPLICABLE, LIST DATE:
___/___/11 ACQUIRED ___/___/11 DISPOSED

NATURE OF INTEREST
- ☑ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold _____ Yrs. remaining
- ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

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

IF APPLICABLE, LIST DATE:
___/___/11 ACQUIRED ___/___/11 DISPOSED

NATURE OF INTEREST
- ☐ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold _____ Yrs. remaining
- ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

* You are not required to report loans from commercial lending institutions 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

INTEREST RATE _____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

☐ Guarantor, if applicable

Comments:

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Betsy Butler

▶ 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 _____ *(Real 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 _____ *(Real 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*: David Freeman

ADDRESS *(Business Address Acceptable)*: 1616 H St., Wash, DC 20003

BUSINESS ACTIVITY, IF ANY, OF LENDER: Retired

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
FAIR POLITICAL PRACTICES COMMISSION

Name: Betsy Butler

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: City of Los Angeles
ADDRESS (Business Address Acceptable): 1400 K St, #208, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03/31/11	$90.00	Parking
06/30/11	$90.00	Parking
09/30/11	$90.00	Parking

▶ NAME OF SOURCE: Tech America
ADDRESS (Business Address Acceptable): 5201 Great American Pkwy, Santa Clara, CA 95054
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01/19/11	$33.83	Reception
06/06/11	$32.41	Reception
/ /	$	

▶ NAME OF SOURCE: City of Los Angeles Continued
ADDRESS (Business Address Acceptable): 1400 K St, #208, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/31/11	$90.00	Parking
/ /	$	
/ /	$	

▶ NAME OF SOURCE: John A. Perez
ADDRESS (Business Address Acceptable): 777 S. Figueroa St.,Ste 4050 Los Angeles, CA 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02/08/11	$117.09	Dinner
02/09/11	$84.30	Dinner
/ /	$	

▶ NAME OF SOURCE: Toyota Motor Corporation
ADDRESS (Business Address Acceptable): 19001 S. Western Ave, Torrance, CA 90501
BUSINESS ACTIVITY, IF ANY, OF SOURCE: Automotive

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03/04/11	$250.49	Ticket
04/17/11	$80.00	Ticket
10/21/11	$15.22	Lunch

▶ NAME OF SOURCE: CA Democratic Party
ADDRESS (Business Address Acceptable): 1404 21st St, #200, Sacramento, CA 95811
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03/30/11	$86.82	Dinner
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Betsy Butler

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE
Bev Hills Peace Officers Assoc
ADDRESS *(Business Address Acceptable)*
P.O. Box 5278, Pasadena, CA 91117
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 07 / 11	$ 150.00	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Beth & Skip Keesal
ADDRESS *(Business Address Acceptable)*
400 Oceangate, Long Beach, CA 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 23 / 11	$ 110.00	Flowers
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Santa Inez Band of Chumash Indians
ADDRESS *(Business Address Acceptable)*
P.O. Box 517, Santa Ynez, CA 93460
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 22 / 11	$ 60.00	Framed Print
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Miller Coors
ADDRESS *(Business Address Acceptable)*
3001 Douglas Blvd, Ste 200, Roseville, CA 95661
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Beverage Industry

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 01 / 11	$ 54.49	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Monterey Bay Aquarium
ADDRESS *(Business Address Acceptable)*
886 Cannery Row, Monterey, CA 93940
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Aquarium

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 04 / 11	$ 94.04	Ocean Day Reception
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Heal the Bay
ADDRESS *(Business Address Acceptable)*
1444 9th St, Santa Monica, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 19 / 11	$ 150.00	Dinner
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Betsy Butler

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE: Assemblymember Holly Mitchell
ADDRESS (Business Address Acceptable): State Capitol, Room 2176, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 11 / 11	$ 75.00	Flowers
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Entertainment Software Association
ADDRESS (Business Address Acceptable): 575 7th St, NW, Ste 300, Washington DC 20004
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 18 / 11	$ 45.82	Dinner
04 / 08 / 11	$ 34.01	Lunch
05 / 18 / 11	$ 30.49	Reception

▶ NAME OF SOURCE: LA Chamber of Commerce
ADDRESS (Business Address Acceptable): 250 S. Bixel St, Los Angeles, CA 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 10 / 11	$ 140.58	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE: California Chamber of Commerce
ADDRESS (Business Address Acceptable): 1215 K St, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 11 / 11	$ 42.53	Luncheon
06 / 01 / 11	$ 189.72	Lunch & Summit
/ /	$	

▶ NAME OF SOURCE: California Dental Association
ADDRESS (Business Address Acceptable): 1201 K Street, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 24 / 11	$ 124.31	Show Ticket
/ /	$	
/ /	$	

▶ NAME OF SOURCE: Boys & Girls Club of Santa Monica
ADDRESS (Business Address Acceptable): 1238 Lincoln Blvd., Santa Monica, CA 90401
BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 07 / 11	$ 90.00	Dinner
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Betsy Butler

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE
Jewish Federation of Greater Los Angeles
ADDRESS *(Business Address Acceptable)*
6505 Wilshire Blvd, Los Angeles, CA 90048
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 10 / 11	$ 180.00	Gala
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Consumer Watchdog
ADDRESS *(Business Address Acceptable)*
1750 Ocean Park Bl #200, Santa Monica, Ca 90405
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-Profit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 04 / 11	$ 350.00	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Consumer Attorneys of California
ADDRESS *(Business Address Acceptable)*
770 L St, #1200, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 30 / 11	$ 200.00	Meal
05 / 02 / 11	$ 150.00	Reception
/ /	$	

▶ NAME OF SOURCE
Toy Industry Association
ADDRESS *(Business Address Acceptable)*
115 Broadway, #400, New York, NY
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 07 / 11	$ 133.00	Dinner
06 / 08 / 11	$ 12.00	Reception
08 / 14 / 11	$ 26.95	Toy

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

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 22 / 11	$ 135.00	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Association of Independent Commercial Producers
ADDRESS *(Business Address Acceptable)*
650 N. Bronson Ave, #223B, Los Angeles, CA 90004
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 27 / 11	$ 175.00	Dinner & Show
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Betsy Butler

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE
Orange County Trial Lawyers Association
ADDRESS *(Business Address Acceptable)*
25602 Alicia Pkwy #403, Laguna Hills, CA 92653
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 15 / 11	$ 150.00	Dinner
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Assemblymember Ricardo Lara
ADDRESS *(Business Address Acceptable)*
State Capitol, Room 2170, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 13 / 11	$ 150.00	Ticket
05 / 11 / 11	$ 50.00	Plant
06 / 14 / 11	$ 68.00	Flowers

▶ NAME OF SOURCE
Gila Katz
ADDRESS *(Business Address Acceptable)*
2850 Artesia Bl., #206, Redondo Beach, CA 90278
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 22 / 11	$ 50.00	Gift Basket
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Planned Parenthood
ADDRESS *(Business Address Acceptable)*
555 Capitol Mall #510, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 18 / 11	$ 65.79	Meal
/ /	$	
/ /	$	

▶ NAME OF SOURCE
Bertolina & Barnato
ADDRESS *(Business Address Acceptable)*
1005 12th St, #H, Sacrametno, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 11 / 11	$ 60.00	Flowers
/ /	$	
/ /	$	

▶ NAME OF SOURCE
CA Council of Environmental & Economic Balance
ADDRESS *(Business Address Acceptable)*
100 Spear St #805, San Francisco, C 94105
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 27 / 11	$ 69.04	Transportation & Meal
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Betsy Butler

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE
AT & T
ADDRESS *(Business Address Acceptable)*
1215 K St, #1800, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Telecommunication

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 10 / 11	$ 420.00	Awards Banquet
/ /	$	
/ /	$	

▶ 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)
/ /	$	
/ /	$	
/ /	$	

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

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

Comments: