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

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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POLITICAL PRACTICES COMMISSION
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Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
BROWN	Arthur	Clevenger

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
City of Buena Park

Division, Board, Department, District, if applicable: City Council

Your Position: Council Member

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

Agency: See Attached

Position:

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

- ☐ State
- ☐ Multi-County
- ☑ City of Buena Park
- ☐ 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:*** 6

- ☐ **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]

herein and in any attached schedules is true and complete. I acknow[redacted]

I certify under penalty of perjury under the laws of the State of C[redacted]

Date Signed 03/18/2015
(month, day, year)

FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

FORM 700 2014

Brown, Arthur Clevenger

Orange County Council of Governments	**Board Member**
Southern California Association of Governments C G **Member**	**Regional Council**
Los Angeles, San Diego,, San Luis Obispo Rail Corridor Agency	**ExOfficio Board Member**
Southern California Regional Rail Agency (Metrolink)	**ExOfficio Board Member**

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

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Brown, Arthur Clevenger

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Chris Brown

ADDRESS *(Business Address Acceptable)*
6630 Mt Whitney Dr. Buena Park, CA 90620

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Automobile Club of Southern California

YOUR BUSINESS POSITION
Retired

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 (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*

_____ *(Describe)*

- ☐ Other _____ *(Describe)*

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Buena Park Historical Society

ADDRESS *(Business Address Acceptable)*
6631 Beach Blvd., Buena Park CA. 90620

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Museum Homes

YOUR BUSINESS POSITION
Curator

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 (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*

_____ *(Describe)*

- ☐ 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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SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE *(Not an Acronym)*
Kirkorian Theatres
ADDRESS *(Business Address Acceptable)*
2275 W. 190th st., Torraance, CA 90504
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Movie Theatres

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 01 / 14	$ 430.00	VIP Pass
/ /	$	
/ /	$	

▶ NAME OF SOURCE *(Not an Acronym)*
League of California Cities
ADDRESS *(Business Address Acceptable)*
1400 K Street, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legislative Advocaates

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 04 / 14	$ 55.00	Reception
/ /	$	
/ /	$	

▶ NAME OF SOURCE *(Not an Acronym)*
Southern California Gas Co.
ADDRESS *(Business Address Acceptable)*
1919 State College, Anaheim, CA 92806
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Gas Utility Proavider

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 22 / 14	$ 225.00	Cypress College Ameri
/ /	$	-cana Awards.
/ /	$	

▶ NAME OF SOURCE *(Not an Acronym)*
Richards Watson and Gershon
ADDRESS *(Business Address Acceptable)*
355 South Grand Ave., Los Angeles, CA 90071
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 25 / 14	$ 110.00	Dinner at Black Angus
09 / 04 / 14	$ 55.00	Reception
12 / 15 / 14	$ 60.00	Fruit Gift Box

▶ NAME OF SOURCE *(Not an Acronym)*
City Ventures
ADDRESS *(Business Address Acceptable)*
3121 Michelson Dr. Suite 150, Irvine, CA 92612
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate Development

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 03 / 14	$ 55.00	Reception
/ /	$	
/ /	$	

▶ NAME OF SOURCE *(Not an Acronym)*
Townsend Public Affairs /Griffin Structures Joint Host
ADDRESS *(Business Address Acceptable)*
2699 White Rd, Irvine CA Suite 251 92614
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public Affairs/Project management

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 04 / 14	$ 55.00	Reception
/ /	$	
/ /	$	

Comments:

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SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
Aleshire & Wynder, LLP
ADDRESS *(Business Address Acceptable)*
1881 Von Kaarman Av. suite 1700, Irvine, CA 92612
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09/04/14	$ 110.00	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Dr Shim, Chairman
ADDRESS *(Business Address Acceptable)*
Seoul, Korea
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Civic Origanization Korean War Veterans.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04/25/14	$ 50.00	Shoe Tree, Metal
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Knott's Berry Farm
ADDRESS *(Business Address Acceptable)*
one Cedar Point Fr., Sandusky, OH 448790
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Amusement Park

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09/23/14	$ 112.00	Adult Annual Pass
09/26/14	$ 138.00	Hollowen Haunt Food
/ /	$	and admission

► NAME OF SOURCE *(Not an Acronym)*
Goodwill Cooperation Service
ADDRESS *(Business Address Acceptable)*
Seoul, Korea
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Church

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04/28/14	$ 20.00	Challenge Coin
04/28/14	$ 120.00	Dinner for 2
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Manufactured Housing Educational Trust
ADDRESS *(Business Address Acceptable)*
25241 Paseo de Alicia, Suite 120, Laguna Hills 9265
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Manufactured Housing Industry Advocates

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/03/14	$ 60.00	Breakfast/Sees Candy
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
City of Seounbuc-Gu
ADDRESS *(Business Address Acceptable)*
Seoul Korea
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Municipal government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04/28/14	$ 100.00	Wooden Boxes
04/28/14	$ 16.00	Thermo Drink Cups
04/28/14	$ 50.00	Sm Carved ducks 2

Comments:

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SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE *(Not an Acronym)*
The Myung Won Cultural Foundation
ADDRESS *(Business Address Acceptable)*
Seoul Korea
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Cultural Foundation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 28 / 14	$ 50.00	2 Bags of Tea. 60g.
/ /	$	
/ /	$	

▶ 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)
/ /	$	
/ /	$	
/ /	$	

▶ 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)
/ /	$	
/ /	$	
/ /	$	

Comments: