CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

CG

COVER PAGE

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CHINO HILLS

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NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Marquez	Ray	Monico

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
City of Chino Hills

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: _____ Position: _____

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

- ☐ State
- ☐ Multi-County _____
- ☑ City of CHINO HILLS
- ☐ Judge or Court Commissioner (Statewide Jurisdiction)
- ☐ County of _____
- ☒ Other Expanded see attached

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:*** 5

- ☐ **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

✓ Expanded statement

-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)

FORM 700 – STATEMENT OF ECONOMIC INTERESTS

EXPANDED STATEMENT FOR

RAY MARQUEZ

2014 Annual Statements –

1. San Bernardino Associated of Governments – Alternate, Board Member County

2. Southern California Association of Government – Regional Council Multi-County (Filed Assuming Office Statement in October 2014.)

CG

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: Ray Marquez

▶ 1. BUSINESS ENTITY OR TRUST

Name: Marquez Tutoring

Address *(Business Address Acceptable)*: 15922 Old Carbon Canyon Rd

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

GENERAL DESCRIPTION OF THIS BUSINESS: Tutoring of Students

FAIR MARKET VALUE
☑ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/14 ACQUIRED
___/___/14 DISPOSED

NATURE OF INVESTMENT
☐ Partnership ☐ Sole Proprietorship ☑ Wife company (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.)

☐ None or ☐ Names listed below

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

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address 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:
___/___/14 ACQUIRED
___/___/14 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 THIS BUSINESS: _____

FAIR MARKET VALUE
☐ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/14 ACQUIRED
___/___/14 DISPOSED

NATURE OF INVESTMENT
☐ Partnership ☐ Sole Proprietorship ☐ _____ (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
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▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

☐ None or ☐ Names listed below

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Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address 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:
___/___/14 ACQUIRED
___/___/14 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
Ray Marquez

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Advantage Real Estate

ADDRESS *(Business Address Acceptable)*
146111 Ramona Ave,Chino CA 91710

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Sales

YOUR BUSINESS POSITION
Real Estate Broker

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

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 (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: _____

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Name
Ray Marquez

SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
Harkins Theatres
ADDRESS *(Business Address Acceptable)*
7511 E. Mc Donald Dr.,Scottsdale AZ 85250
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Movie Theatre

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 02 / 14	$ 100.00	Movie Tickets
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Water Education of Latino Leaders
ADDRESS *(Business Address Acceptable)*
930 Colorado Blvd, Building 2 , los Angeles,CA 9004
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Water Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 26 / 14	$ 395.00	Conference
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Planes of Fame Air Museum
ADDRESS *(Business Address Acceptable)*
7000 Merrill ave #17,Chino CA 91710
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Air Mueseum

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 14 / 14	$ 250.00	weekend pass
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Boy's Republic High School
ADDRESS *(Business Address Acceptable)*
1907 Boy's Republic Drive, Chino Hills
BUSINESS ACTIVITY, IF ANY, OF SOURCE
High School

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 01 / 14	$ 50.00	Della Robbia Wreath
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
KV Kumar
ADDRESS *(Business Address Acceptable)*
PO Box 17131, Anaheim, CA 92801
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 06 / 14	$ 80.00	Wine Gift Basket
/ /	$	
/ /	$	

► 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: