AT/AN2014

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

# STATEMENT OF ECONOMIC INTERESTS
## COVER PAGE

RECEIVED
Date Initial Filing Received
APR 2 2015
City Clerk's Office
City of Bell

*Please type or print in ink.*

| NAME OF FILER (LAST) | (FIRST) | (MIDDLE) |
|---|---|---|
| Quintana | Ana Maria | |

### 1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
City of Bell

Division, Board, Department, District, if applicable

Your Position
Council Member

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

Agency: City Council  Position: Council Member

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FAIR POLITICAL PRACTICES COMMISSION
2015 MAY -4 PM 2:17

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

- ☐ State
- ☐ Multi-County
- ☑ City of Bell
- ☐ Judge or Court Commissioner (Statewide Jurisdiction)
- ☑ County of Los Angeles
- ☐ 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 ___/___/___

☐ **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:*** 4

- ☐ **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. Verification

[redacted]

**Date Signed** 4/22/15
*(month, day, year)*

[redacted]

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PRACTICES COMMISSION
2015 MAY -4 PM 2:19

# SCHEDULE D
## Income – Gifts

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

► NAME OF SOURCE *(Not an Acronym)*
Irma Moisa Rodriguez
ADDRESS *(Business Address Acceptable)*
12800 Center Ct. Dr. Ste 300 Cerritos, CA 90706
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 01/07/14 | $ 20 | Lunch |
| 03/27/14 | $ 86 | Dinner |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Gabriel Sandoval
ADDRESS *(Business Address Acceptable)*
12800 Center Ct. Dr. Ste 300 Cerritos, CA 90706
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 03/08/14 | $ 150 | Clippers Game Ticket |
| / / | $ | |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Southern California Edison Gov. Advisory Board
ADDRESS *(Business Address Acceptable)*
2244 S. Walnut St. Rosemead, CA. 91770
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 07/16/14 | $ 20 | Lunch |
| 10/27/14 | $ 20 | Lunch |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Isabel Birrueta
ADDRESS *(Business Address Acceptable)*
1100 S. Flower St. Ste. 2200 Los Angeles, CA 90015
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 04/22/14 | $ 57 | Lunch |
| / / | $ | |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Boys and Girls Club Rio Hondo
ADDRESS *(Business Address Acceptable)*
7104 Perry Rd. Bell Gardens, CA. 90201
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 02/16/14 | $ 35 | Fashion Show |
| / / | $ | |
| / / | $ | |

**Filer's Verification**

Date Signed 4/20/15

**Comments:**

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FAIR POLITICAL
PRACTICES COMMISSION
2015 MAY -4 PM 2:19

# SCHEDULE D
## Income – Gifts

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

► NAME OF SOURCE *(Not an Acronym)*
Pamela Yugar
ADDRESS *(Business Address Acceptable)*
6330 Pine Ave. Bell, CA 90201
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/01/14 | $ 15 | Lunch |
| 05/01/14 | $ 50 | Dinner |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Ibeth Carcamo
ADDRESS *(Business Address Acceptable)*
633 W. 5th Ste. 4000 Los Angeles, CA. 90071
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/01/14 | $ 50 | Dinner |
| / / | $ | |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Terry Rodrigue
ADDRESS *(Business Address Acceptable)*
15061 Springdale St. Ste. 205 Huntington Beach, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/01/14 | $ 50 | Dinner |
| 05/22/14 | $ 15 | Future Scholars Dinner |
| 07/09/14 | $ 40 | Dinner |

► NAME OF SOURCE *(Not an Acronym)*
Arsen and Nick Sarkisian (NASA)
ADDRESS *(Business Address Acceptable)*
1701 Gage Rd. Montebello, CA. 90640
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/16/14 | $ 80 | Dinner |
| / / | $ | |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Jacob Mojarro
ADDRESS *(Business Address Acceptable)*
612 W. Whittier Blvd. Montebello, CA. 90640
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/01/14 | $ 30 | Gift Card |
| 05/01/14 | $ 50 | Dinner |
| / / | $ | |

**Filer's Verification**

**Date Signed** 4/22/15

**Comments:**

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PRACTICES COMMISSION
2015 MAY -4 PM 2: 19

# SCHEDULE D
## Income – Gifts

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

► NAME OF SOURCE *(Not an Acronym)*
Rodrigo Vazquez
ADDRESS *(Business Address Acceptable)*
180 S. Sycamore Ave. #101 Los Angeles, CA. 90640
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 06 / 14 / 14 | $ 150 | MexAm Bar Assoc Gal |
| 10 / 17 / 14 | $ 150 | Latina Lawyers Gala |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Salvador Colin
ADDRESS *(Business Address Acceptable)*
Roma Norte, Ciudad de Mexico C.P. 06700 Mexico
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 10 / 21 / 14 | $ 100 | Painting |
| / / | $ | |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Alshire & Wynder
ADDRESS *(Business Address Acceptable)*
18881 Von Karman Ave. #1700 Irvine, CA. 92612
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 07 / 31 / 14 | $ 15 | Lunch |
| 09 / 04 / 14 | $ 115 | Dinner |
| / / | $ | |

► 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)*
Spiker Consulting Group (Ken & Adam Spiker)
ADDRESS *(Business Address Acceptable)*
1100 S. Flower St. Ste. 3300 Los Angeles, CA 90015
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 11 / 07 / 14 | $ 70 | Dinner |
| / / | $ | |
| / / | $ | |

[redacted]

Date Signed 4/22/15

[redacted]

**Comments:**

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

# STATEMENT OF ECONOMIC INTERESTS

CG

## COVER PAGE

RECEIVED APR 01 2015

Date Initial Filing Received
Office Use Only

RECEIVED APR 01 2015 City Clerk's Office

RECEIVED FAIR POLITICAL PRACTICES COMMISSION 2015 APR -6 PM 3:17

*Please type or print in ink.*

| NAME OF FILER (LAST) | (FIRST) | (MIDDLE) |
|---|---|---|
| Quintana | Ana Maria | |

### 1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
City of Bell

Division, Board, Department, District, if applicable

Your Position
Council Member

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

Agency: City Council  Position: Council Member

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

- ☐ State
- ☐ Multi-County _____
- ☑ City of Bell
- ☐ Judge or Court Commissioner (Statewide Jurisdiction)
- ☑ County of Los Angeles
- ☐ 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 ____/____/_____

☐ **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:*** 6

- ☐ **Schedule A-1** - *Investments* – schedule attached
- ☐ **Schedule A-2** - *Investments* – schedule attached
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- ☐ **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 ackno[redacted]

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

**Date Signed** 04/01/2015
*(month, day, year)*

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Ana Maria Quintana

# SCHEDULE D
## Income – Gifts

▶ NAME OF SOURCE *(Not an Acronym)*
Irma Moisa Rodriguez
ADDRESS *(Business Address Acceptable)*
12800 Center Ct. Dr. Ste 300 Cerritos, CA. 90706
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 01/07/14 | $ 20.00 | Lunch |
| 03/27/14 | $ 85.55 | Dinner |
| / / | $ | |

▶ NAME OF SOURCE *(Not an Acronym)*
Isabel Birrueta
ADDRESS *(Business Address Acceptable)*
1100 S. Flower St. Ste. 2200 Los Angeles, CA. 90015
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 04/22/14 | $ 57.48 | Lunch |
| / / | $ | |
| / / | $ | |

▶ NAME OF SOURCE *(Not an Acronym)*
Southern California Edison Gov. Advisory Board
ADDRESS *(Business Address Acceptable)*
2244 S. Walnut St. Rosemead, CA. 91770
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 02/16/14 | $ 35.00 | Fashion Show Ticket |
| 07/16/14 | $ 15.00 | Lunch |
| 10/27/14 | $ 15.00 | Lunch |

▶ NAME OF SOURCE *(Not an Acronym)*
Pamela Yugar
ADDRESS *(Business Address Acceptable)*
6330 Pine Ave. Bell, CA. 90201
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/01/14 | $ 15.00 | Lunch |
| 05/01/14 | $ 50.00 | Lunch |
| / / | $ | |

▶ NAME OF SOURCE *(Not an Acronym)*
Gabriel Sandoval
ADDRESS *(Business Address Acceptable)*
12800 Center Ct. Dr. Ste. 300 Cerritos, CA. 90703
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 03/08/14 | $ 150.00 | Clippers Game Ticket |
| / / | $ | |
| / / | $ | |

▶ NAME OF SOURCE *(Not an Acronym)*
Terry Rodrigue
ADDRESS *(Business Address Acceptable)*
15061 Springdale St. Ste. 205 Huntington Beach, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/01/14 | $ 50.00 | Dinner |
| 05/22/14 | $ 15.00 | Future Scholars Dinner |
| 07/09/14 | $ 40.00 | Dinner |

**Comments:**

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Ana Maria Quintana

# SCHEDULE D
## Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
Jacob Mojarro
ADDRESS *(Business Address Acceptable)*
612 W. Whittier Blvd.
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Montebello, CA. 90640

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/01/14 | $ 30.00 | Starbucks Gift Card |
| 05/01/14 | $ 50.00 | Dinner |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Rodrigo Vazquez
ADDRESS *(Business Address Acceptable)*
180 S. Sycamore Ave. #101
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Los Angeles, CA. 90036

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 06/14/14 | $ 150.00 | Mex Am Bar Assoc Gal: |
| 10/17/14 | $ 150.00 | Latina Lawyers Gala |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Ibeth Carcamo
ADDRESS *(Business Address Acceptable)*
633 W. 5th St. Ste. 4000 Los Angeles, CA. 90071
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/01/14 | $ 50.00 | Dinner |
| / / | $ | |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Alshire & Wynder, LLP
ADDRESS *(Business Address Acceptable)*
18881 Von Karman Ave. #1700
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Irvine, CA. 92612

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 07/31/14 | $ 15.00 | Lunch |
| 09/04/14 | $ 115.15 | Dinner |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Arsen and Nick Sarkisian (NASA)
ADDRESS *(Business Address Acceptable)*
1701 Gage Rd.
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Montebello, CA. 90640

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 05/16/14 | $ 80.00 | Dinner |
| / / | $ | |
| / / | $ | |

► NAME OF SOURCE *(Not an Acronym)*
Spiker Consulting Group (Ken & Adam Spiker)
ADDRESS *(Business Address Acceptable)*
1100 S. Flower St. Ste. 3300
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Los Angeles, CA. 90015

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 11/07/14 | $ 70.00 | Dinner |
| / / | $ | |
| / / | $ | |

**Comments:**

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Ana Maria Quintana

# SCHEDULE D
## Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
Salavdor Colin

ADDRESS *(Business Address Acceptable)*
Roma Norte, Ciudad de Mexico C.P. 06700 Mexico

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---|---|---|
| 10 / 21 / 14 | $ 100.00 | Painting |
| / / | $ | |
| / / | $ | |

► 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:**

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Ana Maria Quintana

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

- **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 $440 gift limit, but may result in a disqualifying conflict of interest.**

---

► NAME OF SOURCE *(Not an Acronym)*
League of California Cities
ADDRESS *(Business Address Acceptable)*
1400 K Street
CITY AND STATE
Sacramento, CA. 95814
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
Advocacy for cities and their residents.
DATE(S): __/__/__ - __/__/__ *(If gift)* AMT: $ 3,150.68
TYPE OF PAYMENT: (must check one) ☐ Gift ☑ Income
☐ Made a Speech/Participated in a Panel
☑ Other - Provide Description
Travel, meal and lodging for volunteer services as a member of the League board of directors.

---

► NAME OF SOURCE *(Not an Acronym)*
California Contract Cities Association
ADDRESS *(Business Address Acceptable)*
11027 Downey Ave.
CITY AND STATE
Downey, CA. 90241
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
Advocacy for cities and their residents.
DATE(S): __/__/__ - __/__/__ *(If gift)* AMT: $ 324.65
TYPE OF PAYMENT: (must check one) ☐ Gift ☑ Income
☐ Made a Speech/Participated in a Panel
☑ Other - Provide Description
Meals for volunteer services as a member of executive board.

---

► NAME OF SOURCE *(Not an Acronym)*
League of California Cities
ADDRESS *(Business Address Acceptable)*
1400 K Street
CITY AND STATE
Sacramento, CA. 95814
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
Advocacy for cities and their residents.
DATE(S): __/__/__ - __/__/__ *(If gift)* AMT: $ 134.15
TYPE OF PAYMENT: (must check one) ☐ Gift ☑ Income
☐ Made a Speech/Participated in a Panel
☑ Other - Provide Description
Meals for volunteer services as a member of a League Policy Committee.

---

► NAME OF SOURCE *(Not an Acronym)*
East Yard Communities for Environmental Justice
ADDRESS *(Business Address Acceptable)*
2317 A. Atlantic Blvd.
CITY AND STATE
Commerce, CA. 90040
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): __/__/__ - __/__/__ *(If gift)* AMT: $ 0.00
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
☑ Made a Speech/Participated in a Panel
☐ Other - Provide Description

**Comments:**

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

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Ana Maria Quintana

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

- **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 $440 gift limit, but may result in a disqualifying conflict of interest.**

► NAME OF SOURCE *(Not an Acronym)*
Latinas Represent
ADDRESS *(Business Address Acceptable)*
815 16th St. NW 3rd Floor
CITY AND STATE
Washington, DC. 20006
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): __/__/__ - __/__/__ *(If gift)* AMT: $ 0.00
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
☑ Made a Speech/Participated in a Panel
☐ Other - Provide Description

► NAME OF SOURCE *(Not an Acronym)*
ADDRESS *(Business Address Acceptable)*
CITY AND STATE
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): __/__/__ - __/__/__ *(If gift)* AMT: $
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
☐ Made a Speech/Participated in a Panel
☐ Other - Provide Description

► NAME OF SOURCE *(Not an Acronym)*
ADDRESS *(Business Address Acceptable)*
CITY AND STATE
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): __/__/__ - __/__/__ *(If gift)* AMT: $
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
☐ Made a Speech/Participated in a Panel
☐ Other - Provide Description

► NAME OF SOURCE *(Not an Acronym)*
ADDRESS *(Business Address Acceptable)*
CITY AND STATE
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): __/__/__ - __/__/__ *(If gift)* AMT: $
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
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☐ Other - Provide Description

**Comments:**