

**EB**

**COVER PAGE**  
2008 FEB 21 PM 3:39  
A Public Document

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER		
Chiang	John		(213) 833-6010		
MAILING ADDRESS (May use business address)	STREET	CITY	STATE	ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS
777 S. Figueroa St., Ste. 4800	Los Angeles	CA	90017	213/833-6011	

**1. Office, Agency, or Court**

Name of Office, Agency, or Court:

State Controller's office

Division, Board, District, if applicable:

Your Position:

California State Controller

➔ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

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

State

County of \_\_\_\_\_

City of \_\_\_\_\_

Multi-County \_\_\_\_\_

Other \_\_\_\_\_

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

Assuming Office/Initial Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Annual: The period covered is January 1, 2007, through December 31, 2007.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2007.

Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)

The period covered is January 1, 2007, through the date of leaving office.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

Candidate

**4. Schedule Summary**

➔ Total number of pages including this cover page: 12

➔ Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1  Yes - schedule attached  
Investments (Less than 10% Ownership)

Schedule A-2  Yes - schedule attached  
Investments (10% or greater Ownership)

Schedule B  Yes - schedule attached  
Real Property

Schedule C  Yes - schedule attached  
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D  Yes - schedule attached  
Income - Gifts

Schedule E  Yes - schedule attached  
Income - Travel Payments

-or-

No reportable interests on any schedule

**5. Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/17/08  
(month, day, year)

Signature John Chiang  
(File the originally signed statement with your filing official.)

**SCHEDULE A-1  
Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)  
Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
John Chiang

> NAME OF BUSINESS ENTITY  
Citigroup

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Financial

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

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      1/5/07  
 ACQUIRED                      DISPOSED

> NAME OF BUSINESS ENTITY

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

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
 ACQUIRED                      DISPOSED

> NAME OF BUSINESS ENTITY  
Pfizer

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Pharmaceutical

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

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      1/5/07  
 ACQUIRED                      DISPOSED

> NAME OF BUSINESS ENTITY

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

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
 ACQUIRED                      DISPOSED

> NAME OF BUSINESS ENTITY

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

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
 ACQUIRED                      DISPOSED

> NAME OF BUSINESS ENTITY

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

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/07      \_\_\_\_\_/\_\_\_\_\_/07  
 ACQUIRED                      DISPOSED

Comments: \_\_\_\_\_

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

> NAME OF BUSINESS ENTITY \_\_\_\_\_

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

NATURE OF INVESTMENT

- Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/07      \_\_\_\_/\_\_\_\_/07  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY \_\_\_\_\_

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

NATURE OF INVESTMENT

- Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/07      \_\_\_\_/\_\_\_\_/07  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY \_\_\_\_\_

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

NATURE OF INVESTMENT

- Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/07      \_\_\_\_/\_\_\_\_/07  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY \_\_\_\_\_

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

NATURE OF INVESTMENT

- Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/07      \_\_\_\_/\_\_\_\_/07  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY \_\_\_\_\_

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

NATURE OF INVESTMENT

- Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/07      \_\_\_\_/\_\_\_\_/07  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY \_\_\_\_\_

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

NATURE OF INVESTMENT

- Stock  
 Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/07      \_\_\_\_/\_\_\_\_/07  
ACQUIRED      DISPOSED

Comments: \_\_\_\_\_



**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
*John Chiang*

STREET ADDRESS OR PRECISE LOCATION  
*10406 DORNSMOUTH AVENUE*

CITY  
*CHATSWORTH*

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED *07* DISPOSED *07*

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.

STREET ADDRESS OR PRECISE LOCATION

CITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED *07* DISPOSED *07*

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, 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 ACTIVITY 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 ACTIVITY 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: *\* Joint Tenancy - owned with Judy Chiang, not rental property*

**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	▶ 1. INCOME RECEIVED
<p>NAME OF SOURCE OF INCOME  <u>Wells Fargo Bank</u></p> <p>ADDRESS  <u>333 South Grand Los Angeles 90071</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE  <u>Financial</u></p> <p>YOUR BUSINESS POSITION  <u>Marketing</u></p> <p>GROSS INCOME RECEIVED  <input type="checkbox"/> \$500 - \$1,000    <input type="checkbox"/> \$1,001 - \$10,000  <input checked="" type="checkbox"/> \$10,001 - \$100,000    <input type="checkbox"/> OVER \$100,000</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED  <input type="checkbox"/> Salary    <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income  <input type="checkbox"/> Loan repayment  <input type="checkbox"/> Sale of _____  <small>(Property, car, boat, etc.)</small>  <input type="checkbox"/> Commission or    <input type="checkbox"/> Rental Income, list each source of \$10,000 or more  <input type="checkbox"/> Other _____  <small>(Describe)</small></p>	<p>NAME OF SOURCE OF INCOME            _____</p> <p>ADDRESS            _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE            _____</p> <p>YOUR BUSINESS POSITION            _____</p> <p>GROSS INCOME RECEIVED  <input type="checkbox"/> \$500 - \$1,000    <input type="checkbox"/> \$1,001 - \$10,000  <input type="checkbox"/> \$10,001 - \$100,000    <input type="checkbox"/> OVER \$100,000</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED  <input type="checkbox"/> Salary    <input type="checkbox"/> Spouse's or registered domestic partner's income  <input type="checkbox"/> Loan repayment  <input type="checkbox"/> Sale of _____  <small>(Property, car, boat, etc.)</small>  <input type="checkbox"/> Commission or    <input type="checkbox"/> Rental Income, list each source of \$10,000 or more  <input type="checkbox"/> Other _____  <small>(Describe)</small></p>

▶ 2. LOAN RECEIVED

\* 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:

<p>NAME OF LENDER*            _____</p> <p>ADDRESS            _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF LENDER            _____</p> <p>HIGHEST BALANCE DURING REPORTING PERIOD  <input type="checkbox"/> \$500 - \$1,000  <input type="checkbox"/> \$1,001 - \$10,000  <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> OVER \$100,000</p>	<p>INTEREST RATE            _____%    <input type="checkbox"/> None</p> <p>TERM (Months/Years)            _____</p> <p>SECURITY FOR LOAN  <input type="checkbox"/> None    <input type="checkbox"/> Personal residence  <input type="checkbox"/> Real Property _____  <small>Street address</small>            _____  <small>City</small>  <input type="checkbox"/> Guarantor _____  <input type="checkbox"/> Other _____  <small>(Describe)</small></p>
--	--

Comments: \_\_\_\_\_

**SCHEDULE D  
Income - Gifts**

> NAME OF SOURCE  
Michelle Steel  
ADDRESS  
550 Deep Valley Dr. #355 Rolling Hills Estates  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Government Official

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/5/07</u>	<u>\$ 17</u>	<u>Reception - Food, drinks</u>
<u>1/5/07</u>	<u>\$ 45</u>	<u>Dinner Food, drinks</u>
___/___/___	\$ _____	_____

> NAME OF SOURCE  
California Homecare Council  
ADDRESS  
3055 Wilshire Blvd., #1050 Los Angeles 90010  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Healthcare

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/17/07</u>	<u>\$ 50.33</u>	<u>Reception - Food, drinks</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
California Tribal Business Alliance  
ADDRESS  
1530 J St., Suite 250, Sacramento  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Tribal Gaming

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/10/07</u>	<u>\$ 83.07</u>	<u>reception Food, drinks</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Central City Association  
ADDRESS  
626 Wilshire Boulevard, Suite 200, Los Angeles 90015  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Business Group

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/18/07</u>	<u>\$ 50</u>	<u>Luncheon</u>
<u>12/11/07</u>	<u>\$ 35</u>	<u>Reception</u>
<u>7/17/07</u>	<u>\$ 35</u>	<u>Reception</u>
___/___/___	\$ _____	_____

> NAME OF SOURCE  
California Teachers Association  
ADDRESS  
1118 10th Street, Sacramento  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/16/07</u>	<u>\$ 70.05</u>	<u>food, drinks</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Australian Government  
ADDRESS  
2049 Century Park East, 19th Flr, Los Angeles 90067  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/13/07</u>	<u>\$ 200</u>	<u>dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
John Chiang

> NAME OF SOURCE  
Consumer Attorneys of Los Angeles  
ADDRESS  
800 W. 6th Street, #700, Los Angeles  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Legal

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/20/07</u>	<u>\$ 100</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
The McClatchy Company  
ADDRESS  
2100 O Street, Sacramento  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
media

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2/3/07</u>	<u>\$ 65.75</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
California Cable and Telecommunications Association  
ADDRESS  
360 22nd St, #750, Oakland 94612  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Cable

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/18/07</u>	<u>\$ 91.72</u>	<u>Reception</u>
<u>1/18/07</u>	<u>\$ 112.76</u>	<u>Dinner</u>
___/___/___	\$ _____	_____

> NAME OF SOURCE  
CTIA - The Wireless Association  
ADDRESS  
1400 16th St, NW, Ste 600, Washington DC  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Communications

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2/21/07</u>	<u>\$ 92.44</u>	<u>Reception - Food, Drinks</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Taxpayers Political Action Committee  
ADDRESS  
40 Wilks, Floor 1, Huff=17, Gould and Burney, 22nd Flr, 400 Capitol Mall, Sacramento 95814  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Business

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/31/07</u>	<u>\$ 52.94</u>	<u>reception</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Gardner Rich Asset Management  
ADDRESS  
40 Stan Haggren 360 East 2nd St, #400 Los Angeles, CA  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Financial

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3/18/07</u>	<u>\$ 85</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
*John Chiang*

> NAME OF SOURCE  
Israel Venture Association

ADDRESS  
Ackerstein Towers C, 6th Floor  
10 Abba Eban Blvd, Herzliya, Pithulch

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Finance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4/29/07</u>	<u>\$ 75</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Palladium Equity Partners

ADDRESS  
1270 Avenue of the Americas, # 2200 New York 10020

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Finance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/13/07</u>	<u>\$ 185.00</u>	<u>Reception</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Peace Officer's Research Association of California

ADDRESS  
4010 Truxel Blvd, Sacramento 95834

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Public Safety

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/2/07</u>	<u>\$ 50.72</u>	<u>Food, drink</u>
<u>10/1/07</u>	<u>\$ 25.00</u>	<u>Dinner</u>
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Economic Alliance of the San Fernando Valley

ADDRESS  
5121 Van Nuys Blvd, # 200 Sherman Oaks 91403

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Business

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7/14/07</u>	<u>\$ 250</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
United States Conference of Mayors

ADDRESS  
LA 90012  
110 Hon. Antonio Villaraigosa, 200 N. Spring St.

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Government Officials

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/27/07</u>	<u>\$ 250</u>	<u>Reception</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Goldman Sachs

ADDRESS  
2121 Avenue of the Stars, # 260 Los Angeles 90067

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Finance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7/9/07</u>	<u>\$ 103.42</u>	<u>Movie</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: \_\_\_\_\_

**SCHEDULE D  
Income – Gifts**

Name  
John Chiang

> NAME OF SOURCE  
Phoenix Realty Group  
ADDRESS  
645 Madison Ave, 5th Fl, New York, New York  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/13/07</u>	<u>\$ 50.00</u>	<u>Reception</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Yucapia Co.  
ADDRESS  
9130 W. Sunset Blvd. Los Angeles, CA  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Finance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/17/07</u>	<u>\$ 176.00</u>	<u>Dinner</u>
<u>4/12/07</u>	<u>\$ 53.00</u>	<u>Lunch</u>
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Consulate General of Japan  
ADDRESS  
50 Fremont Street, 23rd Floor, San Francisco 94105  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7/31/07</u>	<u>\$ 120.00</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Council on Foreign Relations  
ADDRESS  
58 East 68th Street, New York  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
International Relations

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10/31/07</u>	<u>\$ 68.00</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Governor Arnold Schwarzenegger  
ADDRESS  
State Capitol Building, Sacramento, 95814  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7/31/07</u>	<u>\$ 50.00</u>	<u>Balloons</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Bryan Martel  
ADDRESS  
355 Crown Point Circle, Suite A, Sacramento  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Environmental

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10/03/07</u>	<u>\$ 59.00</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: \_\_\_\_\_

**SCHEDULE D  
Income – Gifts**

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <i>John Chang</i>

> NAME OF SOURCE  
Uday Khemka

ADDRESS Saket, New Delhi, India

BUSINESS ACTIVITY, IF ANY, OF SOURCE 110<sup>017</sup>  
Khemka House, 1st Floor, 11 Community Centre

Environment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11/05/07</u>	<u>\$ 239.17</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Tournament of Roses

ADDRESS 391 South Orange Grove Blvd., Pasadena 91181

BUSINESS ACTIVITY, IF ANY, OF SOURCE Festival of sports and Parade

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/07</u>	<u>\$ 300</u>	<u>Football Tickets, Parking</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Beverly Hills Greater LA Association of Realtors

ADDRESS 8501 Wilshire Blvd, Ste. 340, Beverly Hills

BUSINESS ACTIVITY, IF ANY, OF SOURCE Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/6/07</u>	<u>\$ 300</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Pacific Life Insurance Company

ADDRESS 700 Newport Center Dr., Newport Beach, CA 92660

BUSINESS ACTIVITY, IF ANY, OF SOURCE Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/14/07</u>	<u>\$ 340</u>	<u>Football Tickets, Food, parking</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
American Israel Public Affairs Committee

ADDRESS P.O. Box 204, San Francisco, CA 94104

BUSINESS ACTIVITY, IF ANY, OF SOURCE Israel, international relations

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/17/07</u>	<u>\$ 75</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

> NAME OF SOURCE  
Frank Lin

ADDRESS 1139 W. Main St., Alhambra 91801

BUSINESS ACTIVITY, IF ANY, OF SOURCE Automobile

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/19/07</u>	<u>\$ 92</u>	<u>Dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income - Gifts**

> NAME OF SOURCE  
Alex Hughes  
ADDRESS  
694 S. Hobart Blvd. Los Angeles 90005  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5/23/07</u>	<u>\$ 80</u>	<u>Dinner</u>
___/___/___	\$	
___/___/___	\$	

> NAME OF SOURCE  
Titan Group  
ADDRESS  
10901 Valley Blvd., Ste. 18 El Monte 91731  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2/28/07</u>	<u>\$ 4318</u>	<u>Dinner</u>
<u>10/12/07</u>	<u>\$ 50 (approx)</u>	<u>Lunch</u>
___/___/___	\$	

> NAME OF SOURCE  
Jon Sperring  
ADDRESS  
95814  
PWC, 400 Capitol Mall, #600 Sacramento, CA  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Tax

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/18/07</u>	<u>\$ 169</u>	<u>Dinner</u>
___/___/___	\$	
___/___/___	\$	

> NAME OF SOURCE  
Cornell Associates  
ADDRESS  
320 N. Larchmont Blvd, Los Angeles  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Public Affairs

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2/26/07</u>	<u>\$ 58</u>	<u>Dinner</u>
<u>12/16/07</u>	<u>\$ 47</u>	<u>Reception</u>
___/___/___	\$	

> NAME OF SOURCE  
Huey Yu  
ADDRESS  
Wainut 91789  
Metrum Ault, 20570 Earlgate St, Suite 100  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Golf

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12/20/07</u>	<u>\$ 260-340</u>	<u>Golf Gift Certificate</u>
<u>12/20/07</u>	<u>\$ 18</u>	<u>Lunch</u>
___/___/___	\$	

> NAME OF SOURCE  
\_\_\_\_\_  
ADDRESS  
\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

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

Comments: \* Gift certificate was donated to CHP 18-99 Foundation on January 25, 2008. Golf certificate provides for four rounds of golf. weekday value is \$260, weekend value is \$340  
+ I reimbursed Jon Sperring after 30 days.

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

Name  
*John Chiang*

- **Reminder – you must mark the gift or income box.**
- **You are not required to report “income” from government agencies.**

➤ NAME OF SOURCE  
Aspen Institute

ADDRESS  
One Dupon 7 Circle, NW 7th Floor

CITY AND STATE  
Washington, DC 20036

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Aspen-Rodel Fellowship Public Leadership Seminar

DATE(S): 11 / 29 / 07 - 12 / 03 / 07 AMT: \$ 3,067.82  
(If applicable)

TYPE OF PAYMENT: (must check one)  Gift  Income

DESCRIPTION: Total costs for attendance includes transportation, overnight accommodations, meals and seminar materials

➤ NAME OF SOURCE

ADDRESS

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$ \_\_\_\_  
(If applicable)

TYPE OF PAYMENT: (must check one)  Gift  Income

DESCRIPTION: \_\_\_\_\_

➤ NAME OF SOURCE

ADDRESS

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$ \_\_\_\_  
(If applicable)

TYPE OF PAYMENT: (must check one)  Gift  Income

DESCRIPTION: \_\_\_\_\_

➤ NAME OF SOURCE

ADDRESS

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$ \_\_\_\_  
(If applicable)

TYPE OF PAYMENT: (must check one)  Gift  Income

DESCRIPTION: \_\_\_\_\_

Comments: \_\_\_\_\_