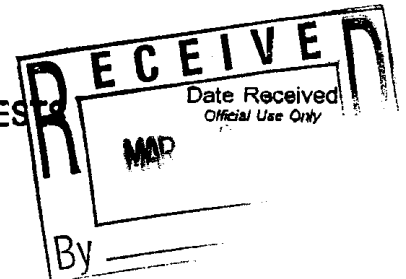




STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A Public Document



Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Calderon	Charles	M.	(562) 692-5858	
MAILING ADDRESS (May use business address)	STREET	CITY	STATE	ZIP CODE
13181 Crossroads Parkway North		City of Industry	CA	91746
			OPTIONAL: FAX / E-MAIL ADDRESS	

1. Office, Agency, or Court

Name of Office, Agency, or Court:
CA State Assembly

Division, Board, District, if applicable:
58th District

Your Position:
Assembly Member

► 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, 2008, through December 31, 2008.

-Or-

The period covered is ____/____/____ through December 31, 2008.

Leaving Office Date Left: ____/____/____ (Check one)

The period covered is January 1, 2008, through the date of leaving office.

-Or-

The period covered is ____/____/____ through the date of leaving office.

Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 4

► 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 - Gifts - 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 02/28/09
(month, day, year)

Signature [Signature]
(File the originally signed statement with your filing official.)

EB

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

R-2 PM 2:39 COVER PAGE

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Date Received
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Please type or print in ink.

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(month, day, year)

Signature [Signature]
(File the originally signed statement with your filing official.)

SCHEDULE C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <hr style="border: none; border-top: 1px solid black;"/>
Charles M. Calderon

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
So. CA Edison

ADDRESS
2244 Walnut Grove Ave., Rosemead, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public Utility Company

YOUR BUSINESS POSITION
Corporation Representative

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
 Sale of _____
(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 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
 Sale of _____
(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* _____

ADDRESS _____

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: _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Charles M. Calderon

▶ NAME OF SOURCE
CA Democratic Party

ADDRESS
1401 21st. Street, Ste. 200, Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 26 / 08</u>	<u>\$ 112.33</u>	<u>Reception/Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
Speaker Nunez Officeholder Account

ADDRESS
555 Capitol Mall, Ste. 1425, Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Committee

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 27 / 08</u>	<u>\$ 78.89</u>	<u>Patagonia Vest</u>
<u>03 / 12 / 08</u>	<u>\$ 44.99</u>	<u>Bottle of Distilled</u>
<u> / / </u>	<u>\$ </u>	<u>Spirits</u>

▶ NAME OF SOURCE
CA Manufacturers & Technology

ADDRESS
1116 11th Street, Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 22 / 08</u>	<u>\$ 139.09</u>	<u>Dinner</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Charles M. Calderon

▶ NAME OF SOURCE
Entertainment Software Assoc.
ADDRESS
575 7th Street NW, #300, Washington, DC
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 08 / 08</u>	<u>\$ 209.78</u>	<u>Dinner</u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE
The Irvine Company
ADDRESS
550 Newport Center Dr., Newport Beach, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 28 / 08</u>	<u>\$ 18.38</u>	<u>Food & beverages</u>
<u>03 / 28 / 08</u>	<u>\$ 64.70</u>	<u>Food & beverages</u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE
Nectar
ADDRESS
1785 E. Sahara Ave., Ste. 490-555, Las Vegas, NV
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 30 / 08</u>	<u>\$ 119.99</u>	<u>Bluetooth Headset</u>
<u>06 / 30 / 08</u>	<u>\$ 24.99</u>	<u>Nectar blue clip</u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE
The Walt Disney Co.
ADDRESS
500 S. Buena Vista, Burbank, CA 91521
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 13 / 08</u>	<u>\$ 366.00</u>	<u>Three adult one day</u>
<u> / / </u>	<u>\$</u>	<u>passes</u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE
State Farms
ADDRESS
1201 K Street, Ste. 920, Sacramento, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insurance

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 14 / 08</u>	<u>\$ 300.00</u>	<u>Food & beverages &</u>
<u> / / </u>	<u>\$</u>	<u>ticket</u>
<u> / / </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>
<u> / / </u>	<u>\$</u>	<u> </u>

Comments: _____