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Rease type or print in Ink. IAME (LAST) Raya Mailing actoress street May use business address) Redacted 1. Office, Agency, or Cour	A Publ (FIRST) Jeanne CITY San Gabriel	Iic Document (MIDDLE) Ellen STATE ZIP CODE	DAYTIME TELEPHONE NUMBER
Raya MaiLING ADDRESS STREET May use business address) Redacted 1. Office, Agency, or Cour	Jeanne CITY	Ellen	
AALING ADDRESS STREET May use business address) Redacted 1. Office, Agency, or Cour	CITY		Redacted
Redacted 1. Office, Agency, or Cour		STATE ZIP CODE	
		CA 91776	OPTIONAL FAX / E-MAIL ADDRES
Name of Office, Agency, or Court:		 4. Schedule Summary ► Total number of pages including this cover page:3	
Citizens Redistricting Commission			
Division, Board, District, if applicable			
Construction and the state of the addition of the		 Check applicable schedules or "No reportable interests." 	
Your Position:		I have disclosed interests on one or more of the attached schedules:	
Applicant 12283		Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)	
If filing for multiple positions, list additional agency(ies)/ position(/), (Alter Positions, list additional agency(ies)/			
position(s): (Attach a separate sheet if necessary.) Agency:		Schedule A-2 X Yes – schedule attached Investments (10% or greater Ownership)	
Position:		Schedule B Question Yes - Real Property	schedule attached
2. Jurisdiction of Office (C		Income, Loans, & Business I and Travel Payments)	schedule attached Positions (income Other than Gifts
County of		Schedule D Yes - schedule attached Income - Gifts	
City of		Schedule E Yes – schedule attached Income – Gilts – Travel Payments	
Multi-County			
Other		-01	-
3. Type of Statement (Chee	ck at least one box)	No reportable interests	on any schedule
	e://	statement. I have reviewed	e diligence in preparing this this statement and to the bes
O The period covered is December 31, 2008.	/, through	attached schedules is true a	
Leaving Office Date Left: (Check one)	J	I certify under penalty of perj of California that the foreg	jury under the laws of the State oing is true and correct.
O The period covered is January 1, 2008, through the date of leaving office.		Date Signed	July 9, 2010 (month. day, year)
O The period covered is		Signature	-

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SCHEDULE Investments, Income of Business Enti (Ownership Interest is 10	e, and Assets ties/Trusts	
► 1. BUSINESS ENTITY OR TRUST	> 1. BUSINESS ENTITY OR TRUST	
John L Raya Insurance Agency Inc	R&C Insurance Services Inc	
Name Redacted San Gabriel CA 91776 Address Check one Image: Check one Image: Trust. go to 2 Image: Business Entity, complete the box, then go to 2	Name Redacted San Gabriel CA 91776 Address Check one Image: Second sec	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 1996 \$\$10,001 - \$100,000 07 / 08 \$\$100,001 - \$1,000,000 ACQUIRED Disposed Disposed Over \$1,000,000 ACQUIRED NATURE OF INVESTMENT Partnership Sole Proprietorship Partnership YOUR BUSINESS POSITION Corp Secretary	FAIR MARKET VALUE IF APPLICABLE LIST DATE: \$2,000 - \$10,000 07 / 08 / 08 \$100,001 - \$100,000 07 / 08 / 08 \$100,001 - \$100,000 ACQUIRED Over \$1,000,000 DISPOSED NATURE OF INVESTMENT Disposed Sole Proprietorship Partnership YCUR BUSINESS POSITION Corp Secretary	
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 50 - \$499 S10,001 - \$100,000	2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME IO THE ENTITY/TRUST) 50 - \$499 510.001 - \$100.000	
S500 - \$1,000 CVER \$100,000	S500 - \$1.000 OVER \$100,000	
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (strach a separate street if necessary) John L Raya Insurance Agency Inc	► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach & separate sheet of necessary) R&C Insurance Services Inc	
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one-box: INVESTMENT REAL PROPERTY	4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one box: INVESTMENT REAL PROPERTY	
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	
Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / 08 \$100,001 - \$100,000 / 08 \$100,001 - \$1,000,000 ACQUIRED DisPOSED	
NATURE OF INTEREST	NATURE OF INTEREST	
Leasehold Other	Leasehold Other	
Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached	
Comments:	FPPC Form 700 (2008/2009) Sch 0.2	

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Posit	DULE C Is, & Business tions Ind Travel Payments) CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMIS Name Jeanne E Raya 12283	
1. INCOME RECEIVED	► 1. INCOME RECEIVED	
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME	
John L Raya Insurance Agency Inc		
Dedected	ADDRESS	
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
Insurance Sales		
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION	
Broker		
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED	
S500 - \$1,000	S500 - \$1,000	
S10,001 - \$100,000 OVER \$100,000	S10,601 - \$100,000 OVER \$100,000	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income	
Loan repayment	Loan repayment	
Sale of		
(Property, car, bost, etc.)	Sale of (Property, car, book etc.)	
Commission or Rental Income, ist cach source of \$10,000 or more	Commission or Rental Income, Ist each source of \$10,000 or	
Other(Describe)	Other(Describe)	
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	ERIOD	
of a retail installment or credit card transaction, man	ial lending institutions, or any indebtedness created as ide in the lender's regular course of business on terms to your official status. Personal loans and loans receiv be disclosed as follows: INTEREST RATE TERM (Months/Years)	
ADDRESS	% 🔲 None	
ADDRESS		
	SECURITY FOR LOAN	
ADDRESS BUSINESS ACTIVITY, IF ANY, OF LENDER		
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN	

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