CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

CLERK
CITY OF INGLEWOOD

Please type or print in ink

NAME OF FILER (LAST) BUTTS (FIRST) JAMES (MIDDLE) J

2016 MAR 28 PM 2:48

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
CITY OF INGLEWOOD

Division, Board, Department, District, if applicable

Your Position
MAYOR

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

Agency: _____ Position: _____

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

- ☐ State
- ☐ Multi-County _____
- ☒ City of INGLEWOOD
- ☐ 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, 2015, through December 31, 2015.
  -or-
  The period covered is ____/____/____, through December 31, 2015.
- ☐ **Assuming Office:** Date assumed ____/____/____
- ☐ **Leaving Office:** Date Left ____/____/____ *(Check one)*
  - ○ The period covered is January 1, 2015, through the date of leaving office.
  -or-
  - ○ The period covered is ____/____/____, through the date of leaving office.
- ☐ **Candidate:** Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► *Total number of pages including this cover page:* 2

Schedules attached

- ☐ **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*

(d)(5)

I have used all reasonable diligence in preparing this statement. I have reviewed this st
herein and in any attached schedules is true and complete. I acknowledge this is a p

I certify under penalty of perjury under the laws of the State of California that th

Date Signed 3/24/2016 (month, day, year) Signature _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

5825 SHENANDOAH AVE

CITY

LOS ANGELES

FAIR MARKET VALUE
- [ ] $2,000 - $10,000
- [ ] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [X] Over $1,000,000

IF APPLICABLE, LIST DATE
__/__/15 ACQUIRED
__/__/15 DISPOSED

NATURE OF INTEREST
- [X] 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.
- [ ] None

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

6415 2ND AVE

CITY

LOS ANGELES

FAIR MARKET VALUE
- [ ] $2,000 - $10,000
- [ ] $10,001 - $100,000
- [X] $100,001 - $1,000,000
- [ ] Over $1,000,000

IF APPLICABLE, LIST DATE
__/__/15 ACQUIRED
__/__/15 DISPOSED

NATURE OF INTEREST
- [X] Ownership/Deed of Trust
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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.
- [ ] None

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* You are not required to report loans from commercial lending institutions 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

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 Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, 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: