

2014 FEB 27 PM 3:37

Please type or print in ink.

NAME OF FILER (LAST) Weideman (FIRST) KURT (MIDDLE) CITY OF TORRANCE  
CITY CLERK'S OFFICE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF TORRANCE

Division, Board, Department, District, if applicable

Your Position

CITY COUNCIL MEMBER

► 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 CITY OF TORRANCE
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2013, through December 31, 2013.
- or-
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2013.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- The period covered is January 1, 2013, through the date of leaving office.
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate: Election year 2014 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

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
3031 TORRANCE BLVD. TORRANCE, CA 90503

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)  
(310) 538-1929

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 acknowledge this is a public document.

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

Date Signed 2/27/2014  
(month, day, year)

Signature \_\_\_\_\_  
(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.

Name  
KURT WEIDEMAN

▶ NAME OF BUSINESS ENTITY  
CHEVRON

GENERAL DESCRIPTION OF THIS BUSINESS  
ENERGY

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)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13     \_\_\_\_/\_\_\_\_/13  
 ACQUIRED     DISPOSED

▶ NAME OF BUSINESS ENTITY  
PEPSICO

GENERAL DESCRIPTION OF THIS BUSINESS  
BEVERAGE

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)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13     \_\_\_\_/\_\_\_\_/13  
 ACQUIRED     DISPOSED

▶ NAME OF BUSINESS ENTITY  
UPS

GENERAL DESCRIPTION OF THIS BUSINESS  
TRANSPORTATION/LOGISTICS

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)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13     \_\_\_\_/\_\_\_\_/13  
 ACQUIRED     DISPOSED

▶ NAME OF BUSINESS ENTITY  
MICROSOFT

GENERAL DESCRIPTION OF THIS BUSINESS  
COMPUTER SOFTWARE

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)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13     \_\_\_\_/\_\_\_\_/13  
 ACQUIRED     DISPOSED

▶ NAME OF BUSINESS ENTITY  
AMERICAN EXPRESS

GENERAL DESCRIPTION OF THIS BUSINESS  
FINANCIAL SERVICES

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)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13     \_\_\_\_/\_\_\_\_/13  
 ACQUIRED     DISPOSED

▶ NAME OF BUSINESS ENTITY  
DETROIT EDISON

GENERAL DESCRIPTION OF THIS BUSINESS  
ENERGY

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)  
 Partnership      Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13     \_\_\_\_/\_\_\_\_/13  
 ACQUIRED     DISPOSED

Comments: Page 1 of 2, Schedule A-1

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

KURT WEIDEMAN

NAME OF BUSINESS ENTITY  
XYLEM

GENERAL DESCRIPTION OF THIS BUSINESS  
Water Systems

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)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY  
EXELIS

GENERAL DESCRIPTION OF THIS BUSINESS  
DEFENSE

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)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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)  
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 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

NATURE OF INVESTMENT  
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 Partnership     Income Received of \$0 - \$499  
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IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_/\_\_\_\_/13      \_\_\_\_/\_\_\_\_/13  
 ACQUIRED                  DISPOSED

Comments: Pg 2 of 2; Schedule A-1

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

Name  
KURT WEIDEMAN

▶ NAME OF SOURCE (Not an Acronym)  
HARBOR CITY/HARBOR Gateway Chamber

ADDRESS (Business Address Acceptable)  
1400 W. 240<sup>TH</sup> St Harbor City, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE 90710  
"HERO'S Luncheon"

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9, 20, 13</u>	<u>\$ 50</u>	<u>Lunch</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
TORRANCE MARKIOTT

ADDRESS (Business Address Acceptable)  
3635 Fashion Way, Torrance, CA. 90503

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
ANNUAL HOLIDAY Tree Lighting Ceremony

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12, 2, 13</u>	<u>\$ 50</u>	<u>Food &amp; Beverages</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
PEDIATRIC Therapy Network

ADDRESS (Business Address Acceptable)  
1815 W. 213<sup>TH</sup> St Snel100, Torr. CA.

BUSINESS ACTIVITY, IF ANY, OF SOURCE 90501  
HALLOWEEN BALL

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10, 12, 13</u>	<u>\$ 125.</u>	<u>Food, Beverages</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
SOUTH BAY Ballet

ADDRESS (Business Address Acceptable)  
1261 SATORI Ave, Torrance, CA 90501

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
"NUTCRACKER PERFORMANCE"

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12, 21, 13</u>	<u>\$ 50</u>	<u>TICKETS TO PERFORMANCE</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
TORRANCE Area Chamber of Commerce

ADDRESS (Business Address Acceptable)  
3400 TORRANCE Blvd. Suite 100, Torr. CA.

BUSINESS ACTIVITY, IF ANY, OF SOURCE 90503  
"STATE OF REGION" - WAXMAN & WALTERS

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11, 25, 13</u>	<u>\$ 50</u>	<u>LUNCH</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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: \_\_\_\_\_