NAME OF FILER (LAST) Shelley
FIRST) Hasselbrink (MIDDLE) Ann

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Los Alamitos
Division, Board, Department, District, if applicable
City Council
Your Position
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 Los Alamitos

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

☐ Annual: The period covered is January 1, 2013, through December 31, 2013.
☐ Leaving Office: Date Left ______/_____/______
☐ or:
[ ] The period covered is ______/_____/______, through December 31, 2013.
☐ The period covered is ______/_____/______, through the date of leaving office.

☐ Assuming Office: Date assumed ______/_____/______
☐ Other

☐ Candidate: Election year _______ and office sought, if different than Part 1: _______

4. Schedule Summary

Check applicable schedules or "None."

☐ 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

☐ None - No reportable interests on any schedule

Total number of pages including this cover page: 2

5. Verification

MAILING ADDRESS
Los Alamitos
STREET
CITY
STATE
ZIP CODE
CA 90720

DAYTIME TELEPHONE NUMBER
( )
E-MAIL ADDRESS (OPTIONAL)

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 the foregoing is true and correct.

Date Signed 12/19/2014
(month, day, year)
## SCHEDULE C
### Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

### 1. INCOME RECEIVED

<table>
<thead>
<tr>
<th>Name of Source of Income</th>
<th>Address (Business Address Acceptable)</th>
<th>Business Activity, If Any, of Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Card Integrators Corp.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Your Business Position   |                                        |                                      |
| Director, Sales & Marketing |                                        |                                      |

<table>
<thead>
<tr>
<th>Gross Income Received</th>
<th>Consideration for Which Income Was Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
<td>Salary, Spouse's or registered domestic partner's income</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>Loan repayment, Partnership</td>
</tr>
<tr>
<td>Over $100,000</td>
<td>Sale of (Real property, car, boat, etc.)</td>
</tr>
<tr>
<td>Other (Describe)</td>
<td></td>
</tr>
</tbody>
</table>

### 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:

<table>
<thead>
<tr>
<th>Name of Lender*</th>
<th>Address (Business Address Acceptable)</th>
<th>Business Activity, If Any, Of Lender</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interest Rate</th>
<th>Term (Months/Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Security For Loan</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Highest Balance During Reporting Period</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Street Address</td>
</tr>
<tr>
<td></td>
<td>City</td>
</tr>
<tr>
<td></td>
<td>Guarantor</td>
</tr>
<tr>
<td></td>
<td>Other</td>
</tr>
</tbody>
</table>

Comments: 

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FPPC Form 700 (2013/2014) Sch. C
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov