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CITY CLERK'S OFC

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Official Use Only

Please type or print in ink.

NAME OF FILER (LAST): HENDERSON (FIRST): DERYL (MIDDLE): IVAN

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*: PLANNING and ENVIROMENTAL QUALITY COMMISSION

Division, Board, Department, District, if applicable:

Your Position: COMMISSIONER

▶ 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
- ☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- ☐ Multi-County _____
- ☐ County of _____
- ☒ City of GARDENA
- ☐ Other _____

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

- ☒ **Annual:** The period covered is January 1, 2020, through December 31, 2020.
  -or- The period covered is ___/___/_____, through December 31, 2020.
- ☐ **Assuming Office:** Date assumed ___/___/_____
- ☐ **Leaving Office:** Date Left ___/___/_____ *(Check one circle.)*
  - ○ The period covered is January 1, 2020, through the date of leaving office.
  - -or-
  - ○ The period covered is ___/___/_____, through the date of leaving office.
- ☐ **Candidate:** Date of Election _____ 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*

5. Verification

MAILING ADDRESS (Business or Agency Address Recommended - Public Document) STREET CITY STATE ZIP CODE

[redacted]

DAYTIME TELEPHONE NUMBER: ([redacted]) [redacted]

EMAIL ADDRESS: [redacted]

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. [redacted]

Date Signed 3-29-2021 (month, day, year)

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

Print Clear

SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Investments must be itemized.
Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

▶ NAME OF BUSINESS ENTITY
STATE FARM / RBC CAPITAL

GENERAL DESCRIPTION OF THIS BUSINESS
IRA RETIREMENT

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:
__/__/20__ ACQUIRED __/__/20__ DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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Comments: _____

Print Clear