

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

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NAME OF FILER (LAST) (FIRST)  
Uranga Roberto

1. Office, Agency, or Court

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

► 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 Long Beach
- 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

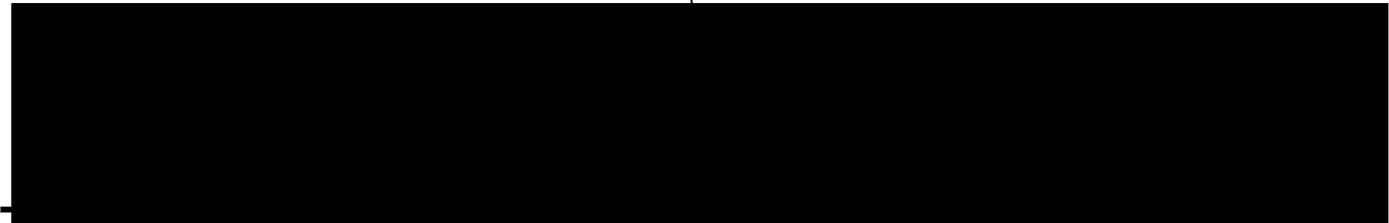
Schedules attached

- 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

5. Verification

MAILING ADDRESS <small>(Business or Agency Address Recommended - Public Document)</small>	STREET	CITY	STATE	ZIP CODE
333 West Ocean Blvd., 14th Floor	Long Beach	CA	90802	
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS			
( 562 ) 570-7777	district7@longbeach.gov			



**SCHEDULE D**  
**Income – Gifts**

Name  
**Roberto Uranga**

▶ NAME OF SOURCE *(Not an Acronym)*  
**Union Pacific Railroad**

ADDRESS *(Business Address Acceptable)*  
**1400 Douglas Street, Omaha, NE 68102**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Railroad Company**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 28 / 15	\$ 250.00	Boys & Girls Club Gala
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*  
**CALSTAD**

ADDRESS *(Business Address Acceptable)*  
**2386 Fair Oaks Blvd., Ste 100 Sacramento, CA 95825**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Strategy and Public Relations Firm**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 18 / 15	\$ 225.00	Grand Prix Dinner
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

▶ 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)
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

▶ 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)
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

▶ 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: \_\_\_\_\_