

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT

Filed Date: 03/31/2023 11:40 AM  
SAN: 031300023-STH-0023

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Allen Cindy

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
City Officials - City Council  
Division, Board, Department, District, if applicable Your Position  
Councilmember - 2nd District

► 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 Long Beach  Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2022, through December 31, 2022.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one circle.)
- or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2022.  The period covered is January 1, 2022, through the date of leaving office.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  -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 (required)

► Total number of pages including this cover page: 4

Schedules attached

- Schedule A-1 - Investments – schedule attached  Schedule C - Income, Loans, & Business Positions – schedule attached
- Schedule A-2 - Investments – schedule attached  Schedule D - Income – Gifts – schedule attached
- Schedule B - Real Property – 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)  
411 West Ocean Blvd Long Beach CA 90802  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 562 ) 570-2222

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 03/31/2023 11:40 AM Signature Cindy Allen  
(month, day, year) (File the originally signed paper statement with your filing official.)

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
Cindy Allen

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
488 E Ocean Blvd #1502

CITY  
Long Beach, CA, 90802

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

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/22 ACQUIRED \_\_\_\_\_/\_\_\_\_\_/22 DISPOSED

NATURE OF INTEREST  
 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

CITY

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

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/22 ACQUIRED \_\_\_\_\_/\_\_\_\_\_/22 DISPOSED

NATURE OF INTEREST  
 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

\* You are not required to report loans from a commercial lending institution 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\*  
Long Beach City Employee Federal Credit Union

ADDRESS (Business Address Acceptable)  
2801 Temple Ave

BUSINESS ACTIVITY, IF ANY, OF LENDER  
Signal Hill, CA

INTEREST RATE    TERM (Months/Years)  
3.125 %     None    30

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    TERM (Months/Years)  
\_\_\_\_\_ %     None    \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000     \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
Cindy Allen

▶ NAME OF SOURCE (Not an Acronym)  
Musica Angelica  
 ADDRESS (Business Address Acceptable)  
65 S Pine Ave #12 Long Beach CA 90802  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)   |
|---------------------|------------------|--------------------------|
| <u>03 / 19 / 22</u> | <u>\$ 320.00</u> | <u>4 concert tickets</u> |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>        |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>        |

▶ NAME OF SOURCE (Not an Acronym)  
Duncan and Son Lines  
 ADDRESS (Business Address Acceptable)  
23860 West US Highway 85 Buckeye, AZ 85326  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)             |
|---------------------|-----------------|------------------------------------|
| <u>03 / 01 / 22</u> | <u>\$ 80.00</u> | <u>Food and Drink at Reception</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>                  |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>                  |

▶ NAME OF SOURCE (Not an Acronym)  
Activated Events  
 ADDRESS (Business Address Acceptable)  
2912 E Blue Star St, Anaheim CA 92806  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)                |
|---------------------|------------------|---------------------------------------|
| <u>06 / 17 / 22</u> | <u>\$ 300.00</u> | <u>Ticket and Parking for Concert</u> |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>                     |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>                     |

▶ NAME OF SOURCE (Not an Acronym)  
Catalyst Cannabis  
 ADDRESS (Business Address Acceptable)  
433 Pine Ave Ste 500 Long Beach CA 90802  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|------------------------|
| <u>03 / 21 / 22</u> | <u>\$ 175.00</u> | <u>Gift Bag</u>        |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>      |

▶ NAME OF SOURCE (Not an Acronym)  
Alyxander Bear  
 ADDRESS (Business Address Acceptable)  
9441 W Olympic Blvd. Beverly Hills CA 90212  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)   |
|---------------------|------------------|--------------------------|
| <u>06 / 26 / 22</u> | <u>\$ 150.00</u> | <u>Day Trip VIP Pass</u> |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>        |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>        |

▶ NAME OF SOURCE (Not an Acronym)  
Mike Donelon  
 ADDRESS (Business Address Acceptable)  
6245 E Golden Sands Dr. Long Beach CA 90803  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|------------------------|
| <u>06 / 23 / 22</u> | <u>\$ 105.00</u> | <u>Skateboard</u>      |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>      |

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
Cindy Allen

▶ NAME OF SOURCE *(Not an Acronym)*  
Long Beach Convention and Visitors Bureau  
 ADDRESS *(Business Address Acceptable)*  
301 E Ocean Blvd Suite 1900 Long Beach CA 90802  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|------------------------|
| <u>12 / 25 / 22</u> | <u>\$ 100.00</u> | <u>Gift Basket</u>     |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>      |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>      |

▶ NAME OF SOURCE *(Not an Acronym)*  
International City Theater  
 ADDRESS *(Business Address Acceptable)*  
330 Seaside Way Long Beach CA 90802  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)  |
|---------------------|------------------|-------------------------|
| <u>02 / 11 / 22</u> | <u>\$ 110.00</u> | <u>Two show tickets</u> |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>       |
| <u>   /   /   </u>  | <u>\$      </u>  | <u>          </u>       |

▶ NAME OF SOURCE *(Not an Acronym)*  
National Football League  
 ADDRESS *(Business Address Acceptable)*  
900 District Dr. Inglewood CA 90301  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy)     | VALUE           | DESCRIPTION OF GIFT(S)      |
|---------------------|-----------------|-----------------------------|
| <u>09 / 08 / 22</u> | <u>\$ 100</u>   | <u>NFL Kickoff VIP Pass</u> |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </u>           |
| <u>   /   /   </u>  | <u>\$      </u> | <u>          </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) |
|--------------------|-----------------|------------------------|
| <u>   /   /   </u> | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u> | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u> | <u>\$      </u> | <u>          </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) |
|--------------------|-----------------|------------------------|
| <u>   /   /   </u> | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u> | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u> | <u>\$      </u> | <u>          </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) |
|--------------------|-----------------|------------------------|
| <u>   /   /   </u> | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u> | <u>\$      </u> | <u>          </u>      |
| <u>   /   /   </u> | <u>\$      </u> | <u>          </u>      |

Comments: \_\_\_\_\_