CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER (LAST) Lowenthal
(FIRST) Suja
(MIDDLE)

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
☐ Multi-County ______________________________
☐ City of Long Beach ______________________________
☐ 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, 2015, through December 31, 2015.
☐ Leaving Office: Date Left ______/_____/______
- or -
The period covered is ______/_____/______, through December 31, 2015.
☐ The period covered is ______/_____/______, through the date of leaving office.
☐ Assuming Office: Date assumed ______/_____/______
☐ Candidate: Election year ______ and office sought, if different than Part 1: ______________________________

4. Schedule Summary (must complete)
☐ Total number of pages including this cover page: ______
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
333 W. Ocean Blvd., Lobby Level
Long Beach, CA 90802

STREET
CITY
STATE
ZIP CODE

E-MAIL ADDRESS
suja.lowenthal@longbeach.gov

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 03/30/2016 12:47 PM Signature ______________________
(month, day, year) (File the originally signed statement with your filing officer.)
### Schedule D

**Income – Gifts**

<table>
<thead>
<tr>
<th>Name of Source</th>
<th>Date (mm/dd/yy)</th>
<th>Value</th>
<th>Description of Gift(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>US Southwestern Falun Dafa Association</td>
<td>02/08/15</td>
<td>$300.00</td>
<td>2 theater tickets to Shen Yun</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CALSTAD</td>
<td>04/18/15</td>
<td>$93.25</td>
<td>Annual Grand Prix Dinner</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Comments:**