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 
[ ] 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, 2015, through December 31, 2015.
[✓] Leaving Office: Date Left 07 / 18 / 2016
[ ] 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: 1

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

[✓] 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

(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER
( )

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 07/18/2016 05:34 PM

Signature

Electronic Submission (File the originally signed statement with your filing officer.)