## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS Date Initial Filing Received Filing Official Use Only **COVER PAGE**

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Please type or print in ink.	LOS ANGELES COUNTY
NAME OF FILER (LAST)  CARLTON  (FIRST)  CLINT	2023 BEC -41 AM 10: 06
1. Office, Agency, or Court	PROPOSITION B UNIT OUR
Agency Name (Do not use acronyms)  Los Angeies Cousty Board of Supervisors  Division, Board, Department, District, if applicable	Supervisor 2nd District Your Position
▶ If filing for multiple positions, list below or on an attachment. (Do not use a	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	Founty of Los Angeles
City of	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2022, through December 31, 2022.  -or- The period covered is/, through	Leaving Office: Date Left//(Check one circle.)  The period covered is January 1, 2022, through the date of
December 31, 2022.	leaving officeor-
Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.
Leandidate: Date of Election March 5th 2009 and office sought, if	f different than Part 1:
4. Schedule Summary (required) ► Total number o	of pages including this cover page:
Schedules 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	in del Rey CA 9029Z
MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS
	Infa CArlton 24. com
I have used all reasonable diligence in preparing this statement. I have reviewe herein and in any attached schedules is true and complete. I acknowledge the	ed this statement and to the best of my knowledge the information contained
I certify under penalty of perjury under the laws of the State of California	a that the foregoing is the and correct.
Date Signed 12/64/23 Sign	nature

## **SCHEDULE A-2** Investments, Income, and Assets

of Business Entities/Trusts

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION Clint Carlton

(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Name 7225 CRESENT PARK W#170 M. 70094	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one ☐ Trust, go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
Sole Online Commenty for kids & Serces	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$0 - \$1,999 \$2,000 - \$10,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000  Over \$1,000,000
NATURE OF INVESTMENT  Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Forly & Coo	YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
■ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below	3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary.)      None or Names listed below
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:  INVESTMENT  REAL PROPERTY	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:  INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST  Property Ownership/Deed of Trust  Stock  Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Yrs. remaining Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments: \_