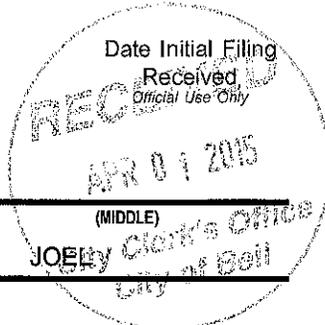


STATEMENT OF ECONOMIC INTERESTS

COVER PAGE



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 GALLARDO FIDENCIO

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
 CITY OF BELL
 Division, Board, Department, District, if applicable
 CITY COUNCIL
 Your Position
 COUNCILMEMBER

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
 Agency: Successor Agency BELL PLANNING COMMISSION Position: Board Member COMMISSIONER

2. Jurisdiction of Office (Check at least one box)

State Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of BELL Other _____

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

Annual: The period covered is January 1, 2014, through December 31, 2014.
 -or- The period covered is ____/____/____, through December 31, 2014.
 Assuming Office: Date assumed 03 / 31 / 2015
 Leaving Office: Date Left ____/____/____ (Check one)
 The period covered is January 1, 2014, through the date of leaving office.
 The period covered is ____/____/____, through the date of leaving office.
 Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None." **► Total number of pages including this cover page: 1**

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)
 6330 Pine Avenue Bell CA 90201
 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
 (323) 588-6211 abustamante@cityofbell.org

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 April 1, 2015 Signature [Handwritten Signature]
 (month, day, year) (File the original signed statement with your filing official.)