

**STATEMENT OF ECONOMIC INTERESTS
 COVER PAGE**

Date Received
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CITY OF SUNNYVALE, CA
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2011 MAR 14 A 9:59

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Lee Otto O

1. Office, Agency, or Court

Agency Name
 City of Sunnyvale
 Division, Board, Department, District, if applicable
 Sunnyvale City Council
 Your Position
 Councilmember

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

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

- State
- Multi-County _____
- City of Sunnyvale
- Judge (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual:** The period covered is January 1, 2010, through December 31, 2010. **-or-**
 The period covered is ____/____/____, through December 31, 2010.
- Assuming Office:** Date ____/____/____
- Candidate:** Election Year _____ Office sought, if different than Part 1: _____
- Leaving Office:** Date Left ____/____/____
 (Check one)
- The period covered is January 1, 2010, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 6

- 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 STREET CITY STATE ZIP CODE
 (Business or Agency Address Recommended - Public Document)
 San Jose CA 95113
 DAYTIME TELEPHONE NUMBER () E-MAIL ADDRESS

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 3/9/2011
 (month, day, year)

Signature 
 (File the originally signed statement with your filing official.)

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Otto Lee

1. INCOME RECEIVED	1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>U.S. Navy</u>	NAME OF SOURCE OF INCOME <u>Intellectual Property Law Group LLP</u>
ADDRESS (Business Address Acceptable) _____	ADDRESS (Business Address Acceptable) <u>_____ San Jose, CA 95113</u>
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Military</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Law</u>
YOUR BUSINESS POSITION <u>Commander (Reserve)</u>	YOUR BUSINESS POSITION <u>Managing Attorney</u>
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ <small>(Describe)</small>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ <small>(Describe)</small>

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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* _____	INTEREST RATE _____ % <input type="checkbox"/> None	TERM (Months/Years) _____
ADDRESS (Business Address Acceptable) _____	SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small>Street address</small> _____ <small>City</small> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <small>(Describe)</small>	
BUSINESS ACTIVITY, IF ANY, OF LENDER _____		
HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000		

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Otto Lee

- **Reminder – you must mark the gift or income box.**
- **You are not required to report income from government agencies.**
- **You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.**

▶ NAME OF SOURCE
 Center Asian American United Self Empowerment

ADDRESS (Business Address Acceptable)
 [REDACTED] Ave., [REDACTED]

CITY AND STATE
 Pasadena, CA 91101

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
 Speak & accept CAUSE award

DATE(S): 4 / 29 / 10 - 4 / 30 / 10 AMT: \$ 159.40
(if applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION: Southwest Flight Coupon for CAUSE 17th Annual Dinner

▶ NAME OF SOURCE
 Democratic Municipal Officials

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
 DMO Board Retreat

DATE(S): 7 / 29 / 10 - 7 / 31 / 10 AMT: \$ 919.60
(if applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION: Travel - flight, hotel, and bowl/concert

▶ NAME OF SOURCE
 US-China Green Energy Council

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
 Green Energy Conference

DATE(S): 6 / 17 / 10 - 6 / 24 / 10 AMT: \$ 2700.00
(if applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION: Travel Accommodation; flight, hotel, ground transportation in Shanghai and neighboring cities

▶ NAME OF SOURCE
 Overseas Chinese Affairs Office, Guangdong Prov.

ADDRESS (Business Address Acceptable)
 [REDACTED]

CITY AND STATE
 Guangzhou, China

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
 16th Asian Games 2010, Closing Ceremony

DATE(S): 11 / 20 / 10 - 11 / 29 / 10 AMT: \$ 2060.00
(if applicable)

TYPE OF PAYMENT: (must check one) Gift Income

DESCRIPTION: Travel Accommodation; hotel, food, and ground transportation in Guangzhou and neighboring cities

Comments: _____