

SDS-5-119

**STATEMENT OF ECONOMIC INTERESTS**

Date Initial Filing Received  
Official Use Only

**COVER PAGE**

Filed Date: 04/29/2016 06:39 AM  
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Please type or print in ink.

NAME OF FILER: (LAST) \_\_\_\_\_ (FIRST) Brian (MIDDLE) \_\_\_\_\_

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms) \_\_\_\_\_  
City of San Clemente  
Division, Board, Department, District, if applicable \_\_\_\_\_ Your Position: \_\_\_\_\_  
Maintenance Operations Supervisor

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 San Clemente
- 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.
- or-
- The period covered is \_\_\_\_\_ through December 31, 2015.
- Assuming Office: Date assumed 01 / 18 / 2016
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
- The period covered is January 1, 2015, through the date of leaving office.
- or-
- The period covered is \_\_\_\_\_ through the date of leaving office.
- 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

-or-  
 **None - No reportable interests on any schedule**

**5. Verification**

MAILING ADDRESS: STREET: \_\_\_\_\_ CITY: San Clemente STATE: CA ZIP CODE: 92672  
(Business or Agency Address Recommended - Public Document)  
DAYTIME TELEPHONE NUMBER: ( 949 ) 361-8200 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 04/29/2016 06:39 AM Signature Electronic Submission  
(month, day, year) (File the originally signed statement with your filing official.)