CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Oity of San Clemente

Date Initial Filing Received
Official Use Only
APR 1 3 2018

Please type or print in ink.

City Clerk Department

NAME OF THE PARTY.			
NAME OF FILER (LAST) (FIRST)	(MIDDLE)		
CARTER SARTHUR	TECH		
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
Division, Board, Department, District, if applicable	MEMBER		
Division, Board, Department, District, if applicable	Your Position		
	-1		
▶ If filing for multiple positions, list below or on an attachment. (Do no	ot use acronyms)		
Agency:	Position:		
, igono).			
2. Jurisdiction of Office (Check at least one box)			
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)		
	County of		
City of JAN CLEMENTE	800008 ·		
City of JAN CLEMEN'S	Other		
3. Type of Statement (Check at least one box)			
Annual: The period covered is January 1, 2017, through	Leaving Office: Date Left/		
December 31, 2017.	(Check one)		
-or- The period covered is/, throu	4 30000		
December 31, 2017.	leaving office.		
Assuming Office: Date assumed//	The period covered is/, through		
Assuming Office. Date assumed	the date of leaving office.		
☐ Candidate: Date of Election and office so	ought, if different than Part 1:		
l. Schedule Summary (must complete) ▶ <i>Total num</i>	ber of pages including this cover page:		
Schedules attached			
Schedule A-1 - Investments – schedule attached	Schedule C - Income Loans & Business Positions - schedule attached		
Schedule A-1 - Investments – schedule attached	☐ Schedule C - Income, Loans, & Business Positions — schedule attached ☐ Schedule D - Income — Gifts — schedule attached		
Schedule B - Real Property – schedule attached			
-or-			
☐ None - No reportable interests on any schedule			
5. Verification			
MAILING ADDRESS STREET CITY	Y STATE ZIP CODE		
(Business or Agency Address Recommended - Public Document)			
21	EMENTE CA 92673		
DAYTIME TELEPHONE NI IMPER	E-MAIL ADDRESS		
I have used all reasonable diligence in preparing this statement. I have herein and in any attached schedules is true and complete. I acknowle	reviewed this statement and to the best of my knowledge the information contained edge this is a public document		
I certify under penalty of perjury under the laws of the State of Ca			
Certify under penalty of penjury under the laws of the State of Ca	mornia tiat ti		
Data Signed 4 4/13/2019	Signature .		
Date Signed	(File the originally signed statement with your filing official.)		

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

FAIR POLITICAL PRACTICES COMMISSION Name	CALIFO	RNIA FORM	700
Name			MISSION
1 2/	Name	Laction Earling and Average	
// · · · · / / / / / / / / / / / / /	Name	7/	1:

► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
JU CARTER	
Name	Name
In CLEMENTE, CA	Address (Decision Address Association)
Address (Business Address Acceptable)	Address (Business Address Acceptable) Check one
Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
HOVERITS TOG	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	\$0 - \$1,999
\$2,000 \$10,000	\$2,000 - \$10,000/17
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
LANTINE OF INVESTMENT	NATURE OF INVESTMENT
NATURE OF INVESTMENT Partnership Sole Proprietorship	☐ Partnership ☐ Sole Proprietorship ☐
Other	Other
YOUR BUSINESS POSITION NONE	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA
SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499	☐ \$0 - \$499 ☐ \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000	S500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000	\$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.)	➤ 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	☐ None or ☐ Names listed below
JU CARTER BUSINESS STUNTED	
4/1/2002	
11:12007	
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
<u>,</u>	
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number of Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property	Check box if additional schedules reporting investments or real property
are attached	are attached

Comments:__