



STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

Date Initial Filing Received AUG 04 2020

City Clerk Department

Please type or print in ink.

NAME OF FILER (LAST) HART (FIRST) WILLIAM "BILL" (MIDDLE) EDWARD

1. Office, Agency, or Court

Agency Name (Do not use acronyms) CITY COUNCIL OF SAN CLEMENTE CANDIDATE FOR CITY COUNCIL - FOUR YEAR TERM

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, Retired Judge, Pro Tem Judge, or Court Commissioner, County of, Other

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

- Annual, Leaving Office, Assuming Office, Candidate: Date of Election 11/3/2020 and office sought, if different than Part 1:

4. Schedule Summary (must complete) Total number of pages including this cover page: 4 Schedules attached: Schedule A-1, Schedule A-2, Schedule B, Schedule C, Schedule D, Schedule E, None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE PO BOX 3544 SAN CLEMENTE CA 92672 DAYTIME TELEPHONE NUMBER EMAIL 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 8/3/2020 (month, day, year)

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

# SCHEDULE A-2

## Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

**▶ 1. BUSINESS ENTITY OR TRUST**

Name \_\_\_\_\_  
Address (Business Address Acceptable) \_\_\_\_\_  
Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000                      \_\_\_/\_\_\_/19                      \_\_\_/\_\_\_/19  
 \$10,001 - \$100,000                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     \_\_\_\_\_ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$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

**▶ 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 \_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property \_\_\_\_\_

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000                      \_\_\_/\_\_\_/19                      \_\_\_/\_\_\_/19  
 \$100,001 - \$1,000,000                      ACQUIRED                      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

**▶ 1. BUSINESS ENTITY OR TRUST**

CHRISTY MACBRIDE PHOTOGRAPHY  
Name  
2021 Calle de los Alamos, San Clemente CA 92672  
Address (Business Address Acceptable)  
Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

ART PHOTOGRAPHY  
FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000                      \_\_\_/\_\_\_/19                      \_\_\_/\_\_\_/19  
 \$10,001 - \$100,000                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     \_\_\_\_\_ Other

YOUR BUSINESS POSITION SPOUSE

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$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

**▶ 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 \_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property \_\_\_\_\_

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000                      \_\_\_/\_\_\_/19                      \_\_\_/\_\_\_/19  
 \$100,001 - \$1,000,000                      ACQUIRED                      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
WILLIAM HART

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
1040 CALLE DEL CERRO #105

CITY  
SAN CLEMENTE, CA 92673

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
4/24/2013 N/A  
ACQUIRED DISPOSED

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining \_\_\_\_\_ Other \_\_\_\_\_

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None  
DENNIS SPRALIN

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
1046 CALLE DEL CERRO #423

CITY  
SAN CLEMENTE, CA 92673

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
12/11/2008 N/A  
ACQUIRED DISPOSED

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining \_\_\_\_\_ Other \_\_\_\_\_

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None  
JUSTIN SCRIBNER

\* You are not required to report loans from a commercial lending institution 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\*  
LAKEVIEW LOAN SERVICING LLC

ADDRESS (Business Address Acceptable)  
PO BOX 8068, VIRGINIA BEACH, VA 23450

BUSINESS ACTIVITY, IF ANY, OF LENDER  
LOAN SERVICING

INTEREST RATE 5.50 %  None TERM (Months/Years) 30 YEARS

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

Guarantor, if applicable

NAME OF LENDER\*  
WELLS FARGO BANK, NA

ADDRESS (Business Address Acceptable)  
1 HOME CAMPUS P2302-04A, DES MOINES IA 50328

BUSINESS ACTIVITY, IF ANY, OF LENDER  
BANK

INTEREST RATE 5.75 %  None TERM (Months/Years) 30 YEARS

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

Guarantor, if applicable

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
 (Including Rental Income)

Name  
WILLIAM HART

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
1046 CALLE DEL CEARO #119  
 CITY  
SAN CLEMENTE, CA 92672

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
6/8/09 N/A  
 ACQUIRED DISPOSED

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None  
MARY THOMMASSON

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
 \_\_\_\_\_  
 CITY  
 \_\_\_\_\_

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ 19 \_\_\_\_\_ 19  
 ACQUIRED DISPOSED

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

\* You are not required to report loans from a commercial lending institution 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\*  
WELLS FARGO BANK, NA  
 ADDRESS (Business Address Acceptable)  
1 HOME CAMPUS, DES MOINES, IA 50328  
 BUSINESS ACTIVITY, IF ANY, OF LENDER  
BANK

INTEREST RATE      TERM (Months/Years)  
5.75 %       None      30 YEARS

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

Guarantor, if applicable

NAME OF LENDER\*  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF LENDER  
 \_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_ %       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

Guarantor, if applicable

Comments: \_\_\_\_\_