

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initiat Filing 2020 ved

City Clerk Department

Please type or print in ink.		
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
DAME	JAMES	SEVERIN
I. Office, Agency, or Court		
Agency Name (Do not use acronyms)	de City Civ	WILL CANDIDATE 2 YEAR
Division, Board, Department, District, if applicable	Your Posit	ion
▶ If filing for multiple positions, list below or on a	n attachment. (Do not use acronyms)	
Agency:	Position: -	
2. Jurisdiction of Office (Check at least or	ne box)	
☐ State		letired Judge, Pro Tem Judge, or Court Commissioner e Jurisdiction)
Multi-County	County c	ıf
City of San Clamete Ca		
3. Type of Statement (Check at least one b	OX)	
Annual: The period covered is January 1, 20	•	9 Office: Date Left/
December 31, 2019.		(Check one circle.)
The period covered is/		period covered is January 1, 2019, through the date of ing office.
Assuming Office: Date assumed/	the o	period covered is/, through date of leaving office.
Candidate: Date of Election 1613 25	and office sought, if different than P	art 1: (14) Courn 2 year Jun
. Schedule Summary (must complete) ► Total number of pages inclu	uding this cover page:
Schedules attached		
Schedule A-1 - Investments – schedule att	ached Schedule C - In	come, Loans, & Business Positions – schedule attached
Schedule A-2 - Investments – schedule attached Schedule D - Income – Gifts – schedule attached		
Schedule B - Real Property – schedule att	ached Schedule E - In-	come - Gifts - Travel Payments - schedule attached
or None No reportable interests on	a any achadula	
or-	arry scriedule	
MAILING ADDRESS STREET	CITY	STATE ZIP CODE
(Pusition of America Address Property of the P	O_A	On Ch 1-72
DAYTIME TELEPHONE NUMBER	SAIS Clambe EMAIL ADDRESS	LA 72010
	- ENVIE ABBRECO	
I have used all reasonable diligence in preparing thi herein and in any attached schedules is true and continuous		and to the best of my knowledge the information contained cument.
I certify under penalty of perjury under the laws	s of the State of California that the forego	ว์เทิต is true and correct.
Date Signed 8 - 5 - 2020	Signature	
(month, day, year)		(File the originally signed paper statement with your filing official.)

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Jim DADE

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Summons Kennas LLC	Wellstongo achieros
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
RENTA	BROKERAGE ALLOUR
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000	\$100,001 - \$1,000,000 \$\sqrt{1,000,000}
NATURE OF INVESTMENT	NATURE OF INVESTMENT
□ Stock □ Other	☐ Stock ☐ Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
/	The second of th
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
15 ADDI 10 ADI 5 A 107 DAT5	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ <u>/_19</u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
OFNERAL RECORDERION OF THIS BUSINESS	OF WER ALL DESCRIPTION OF TWO PHONE
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe) Partnership () Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//	//
, is don't but over	I MORGINED BIOFOGED
Comments:	
Ouminents.	

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

A THE PARK TO THE PARK TO A STATE OF	NIA FORM 700 al practices commission
Name Tim	DAH

► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
SAMMONS RENTHIS LLC	Sammax Famy Trus
260 AVE MONTALVO E. SAN CLULA Address (Business Address Acceptable)	Name 2 AM AM MONTHUN E 3 De Clurk - CA Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS REPORT AND MEMORYTS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$10000,000 \$10000,000 \$1000,000 \$10000,000
NATURE OF INVESTMENT ✓ Partnership ✓ Sole Proprietorship ✓ Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION SPAUSE OWNERSHIP	YOUR BUSINESS POSITION SAUSE TRUST AUGE DA
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	▶ 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	\$10,001 - \$100,000 \$500 - \$1,000 \$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	➤ 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
SAMMOUR, MULER	WELLS FARGO ACCOUNT
EVAN DAHL	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location 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	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	I

SCHEDULE B Interests in Real Property (Including Rental Income)

	IA FORM 700 PRACTICES COMMISSION
Name	
Jim	DAKE

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 260 PUBLICA MONTHUR	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
CITY	CITY
SAN Clement	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$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 Shambock Willer Dank Dank	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
Of mage	
Citai Dath	
EVAN DATE	
* Volume not required to report loans from 3 commercia	I lending institution made in the lender's regular course of
business on terms available to members of the public v loans received not in a lender's regular course of busin	without regard to your official status. Personal loans and
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000	\$500 - \$1,000 \qquad \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	U \$10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	☐ Guarantor, if applicable
Comments:	

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

	IIA FORM 700 L PRACTICES COMMISSION
Name Tm	DAGU

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
OCKRS	VERS
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
ZZZ3 E WELLMGTON \$100	400 Q'STREET
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
SANTA AND CA	SACRAMFAUTO CAL 95811
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
RETIREMENT INCOME	LETIREMENT/COMP
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
── (Real property, car, boat, etc.) ☐ Loan repayment	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
RETREMENT	RETIREMENT INCOME
(Describe)	(Describe)
Other(Describe)	Other
► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	(Describe)
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in th	lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
☐ OVER \$100,000	Other(Describe)
	(2000)NO
Comments:	

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

CALIFORM	NA FORM	700
FAIR POLITICA	L PRACTICES C	OMMISSION
Name	$\overline{}$	
Tim	DAH	2

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
ORANGE COUNTY VEGGOR CONTROL ADDRESS (Business Address Acceptable) BUOI GARDIA CLOSE DLYP G.G. CANT	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
13001 GARDEN CROSE BLYP G.G. CANT	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
VECTOR CONTROL	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
BOARD MEMBER	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
5 -\$500 - \$1,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other	Other
(Describe)	(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	ERIOD
a retail installment or credit card transaction, made in th	lending institution, or any indebtedness created as part of se lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%
ABBITEO (Basilless Address Acceptable)	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
BOOMESS ACTIVITY, II ANT, OF ELINDER	
· · · · · · · · · · · · · · · · · · ·	
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property
	Street address
\$500 - \$1,000	Street address City
	Street address City
\$500 - \$1,000 —	Street address
\$500 - \$1,000 \$1,001 - \$10,000	Street address City Guarantor
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000	Street address City
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	City Guarantor Other