

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE**

City of San Clemente
Date Initial Filing Received
APR 04 2018
City Clerk Department

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
SILVER MATTHEW R

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF SAN CLEMENTE

Division, Board, Department, District, if applicable

Your Position

SPECIAL COUNSEL

► 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

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of SAN CLEMENTE

Other _____

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

Annual: The period covered is January 1, 2017, through December 31, 2017.

Leaving Office: Date Left ____/____/____
(Check one)

-or-
The period covered is 3 / 1 / 2017, through December 31, 2017.

The period covered is January 1, 2017, through the date of leaving office.

Assuming Office: Date assumed ____/____/____

-or-
 The period covered is ____/____/____, through the date of leaving office.

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 2

Schedules attached

Schedule A-1 - Investments - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

Schedule D - Income - Gifts - schedule attached

Schedule B - Real Property - 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)
100 AVENIDA PRESIDIO SAN CLEMENTE CA 92672

DAYTIME TELEPHONE NUMBER
(949) 361-8200

E-MAIL ADDRESS
msilver@silverwrightlaw.com

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 3/30/2018
(month, day, year)

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

