

## STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

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Please type or print in ink.			3	AN. 111400076-3111-0076
NAME OF FILER (LAST)	(FIRST)		(MIDDLE	
McCaughan	Gary			
1. Office, Agency, or Court				
Agency Name (Do not use acrony	yms)			
City of San Clemente				
Division, Board, Department, Distri	ct, if applicable		Your Position	
			Planning Commission	
► If filing for multiple positions, lis	st below or on an attachment.	(Do not use acrony	<u>~</u>	
Agency:			Position:	
2. Jurisdiction of Office (CI	heck at least one box)			
State			Judge, Retired Judge, Pro Ter (Statewide Jurisdiction)	m Judge, or Court Commissioner
Multi-County			County of	
■ City of San Clemente				
3. Type of Statement (Check	k at least one box)			
Annual: The period covered December 31, 2020	is January 1, <b>2020,</b> through		Leaving Office: Date Left (Check	one circle.)
-or- The period covered December 31, <b>2020</b>	is/	_, through	The period covered is Jalleaving office.	nuary 1, 2020, through the date of
<b>▼ Assuming Office:</b> Date assu	umed <u>07 , 01 , 2021</u>	<u>1</u>		/, through
Candidate: Date of Election	and c	office sought, if different	ent than Part 1:	
4. Schedule Summary (mu Schedules attached	st complete) ► Tota	l number of pag	ges including this cover	page:3
_	,		lula C. Incomo I como O.D.	inoco Docitiono - cabadula -4- 1 1
Schedule A-1 - Investmen			lule C - Income, Loans, & Busi lule D - Income – Gifts – sched	iness Positions – schedule attached
Schedule A-2 - Investmen  Schedule B - Real Proper				el Payments – schedule attached
ouileuule b • Keal Ploper	ı, soneddie allaciied		Onto Have	., Salada attachou
-or- None - No reportable	le interests on any sched	dule		
5. Verification	-			
MAILING ADDRESS STREE (Business or Agency Address Recommende		CITY	STATE	ZIP CODE
910 Calle Negocio	asiio Documentij	San Clemen	te CA	92673
DAYTIME TELEPHONE NUMBER			DDRESS	
( 949 ) 361-8200				
I have used all reasonable diligend herein and in any attached schedu				y knowledge the information contained
I certify under penalty of perjury	y under the laws of the Stat	e of California that	the foregoing is true and cor	rect.
Date Signed 07/06/20	21 05:03 PM	Signature	<u>Electroni</u>	ic Submission
<u></u>	day, year)	3	·	er statement with your filing official.)

## SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Gary McCaughan

(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Gary and Patricia McCaughan Family Trust	Gary P. McCaughan, MD. Inc.
, San Clemente, CA. 92673	Name , San Clemente, CA. 92673
Address (Business Address Acceptable)	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	GENERAL DESCRIPTION OF THIS BUSINESS Professional Medical Services Retired
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000   ACQUIRED   DISPOSED   \$100,001 - \$1,000,000   Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:    \$0 - \$1,999
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership X Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION President
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
\$0 - \$499	
➤ 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
► 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
, San Clemente, CA. 92673  Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property , San Clemente, CA. 92673	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   \$10,001 - \$100,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000  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 are attached	Check box if additional schedules reporting investments or real property are attached

Comments: \_

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Gary McCaughan

	NAME OF COURSE OF INCOME
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Gary P. McCaughan, MD. Inc.	100000000000000000000000000000000000000
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
, San Clemente, CA. 92673	BUSINESS ACTIVITY, IF ANY, OF SOURCE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional Medical Services Retired	VOLID BUSINESS POSITION
OUR BUSINESS POSITION	YOUR BUSINESS POSITION
President	
ROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Onl
\$500 - \$1,000  \$1,001 - \$10,000	\$500 - \$1,000  \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
ONSIDERATION 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 Dontel Income Set and account 640,000 as seems
Commission or Rental Income, list each source of \$10,000 or more	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)	Commission of Rental income, list each source of \$10,000 or more  (Describe)
(Describe)	
(Describe)	(Describe)  Other (Describe)
(Describe)  Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercial a retail installment or credit card transaction, made in	Other (Describe)  PERIOD  al lending institution, or any indebtedness created as part of the lender's regular course of business on terms available I status. Personal loans and loans received not in a lender'
(Describe)  Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercia a retail installment or credit card transaction, made in to members of the public without regard to your official regular course of business must be disclosed as follows:	Other (Describe)  PERIOD  al lending institution, or any indebtedness created as part of the lender's regular course of business on terms available I status. Personal loans and loans received not in a lender'y vs:  INTEREST RATE  TERM (Months/Years)
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercia a retail installment or credit card transaction, made in to members of the public without regard to your officia regular course of business must be disclosed as follow IAME OF LENDER*	Other (Describe)    Other (Describe)
(Describe)  Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercia a retail installment or credit card transaction, made in to members of the public without regard to your officia regular course of business must be disclosed as follow  AME OF LENDER*	Other (Describe)    Other (Describe)
(Describe)  Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercial a retail installment or credit card transaction, made into members of the public without regard to your official regular course of business must be disclosed as follow AME OF LENDER*  DDRESS (Business Address Acceptable)	Other (Describe)  PERIOD  al lending institution, or any indebtedness created as part of the lender's regular course of business on terms available I status. Personal loans and loans received not in a lender vs:  INTEREST RATE  TERM (Months/Years)  None
(Describe)  Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercia a retail installment or credit card transaction, made into members of the public without regard to your officia regular course of business must be disclosed as follow  AME OF LENDER*  DDRESS (Business Address Acceptable)	Other (Describe)    Other (Describe)
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercia a retail installment or credit card transaction, made in to members of the public without regard to your officia regular course of business must be disclosed as follow IAME OF LENDER*  DDRESS (Business Address Acceptable)  RUSINESS ACTIVITY, IF ANY, OF LENDER	Other (Describe)    Other (Describe)
(Describe)  Other	Other
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercia a retail installment or credit card transaction, made in to members of the public without regard to your officia regular course of business must be disclosed as follow IAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	Other
(Describe)  Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercia a retail installment or credit card transaction, made in to members of the public without regard to your officia regular course of business must be disclosed as follow IAME OF LENDER*  DDRESS (Business Address Acceptable)  SUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	Other
(Describe)  Other (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  You are not required to report loans from a commercial a retail installment or credit card transaction, made into members of the public without regard to your official regular course of business must be disclosed as follow  AME OF LENDER*  DDRESS (Business Address Acceptable)  USINESS ACTIVITY, IF ANY, OF LENDER  IGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	Other