CALIFORNIA FORM / () () FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

Date Initial Filing Received APR - 1 2022

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Please type or print in ink.

City Clerk Department

NAME OF FILER (LAST)	Gene	_ Wa [Ker
1. Office, Agency, or Court		
Agency Name (Do not use acronyms) Division, Board, Department, District, if applic	n Clement	Your Position Mayor
► If filing for multiple positions, list below or Agency: Coas tal Anir	on an attachment. (Do not use	Position: Board Member
2. Jurisdiction of Office (Check at lea	ast one box)	
State	•	 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County		County of
City of San Cle	ment-e	Other
3. Type of Statement (Check at least of	one box)	
Annual: The period covered is January December 31, 2021.	-	Leaving Office: Date Left/(Check one circle.)
The period covered is/_ December 31, 2021.	, through	The period covered is January 1, 2021, through the date of leaving officeor-
Assuming Office: Date assumed		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 comp	olete) ► Total number	of pages including this cover page:
Schedules attached		
Schedule A-1 - Investments - schedule A-2 - I		Schedule C - Income, Loans, & Business Positions – schedule attached Schedule D - Income – Gifts – schedule attached
Schedule B - Real Property - schedu	ile attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- None - No reportable interes	ts on any schedule	*
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Doc DAYTIME TELEPHONE NUMBER	city San Clemen	te CA 42.673
1949) 324 3170	ing this statement. I have revie	Comes Go O San-clemente. Or sewed this statement and to the best of my knowledge the information contained
I certify under penalty of perjury under the		30 miles 1 mil
Date Signed And 20	227	
(month, day, year)		rr filing official.)
Print Clear		700 - Cover Page (2021/2022 advice@1ppc.ca.gov > ad6-275-3772 • www.fppc.ca.go

SCHEDULE A-1 Investments

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

Investments must be itemized. Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Gene James

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
NIA	
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
\$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 (Describe)	Stock Other(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// <u>21</u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
OLNEINE BESCHI HON OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499
Income Received of \$500 of More (Report on Schedule C)	☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//21//21	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	PENNINE OF BOSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	- The Book Education
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000
NATURE OF INVESTMENT	
Stock Other	NATURE OF INVESTMENT Stock Other
Partnership Income Received of \$0 - \$499	(Describe)
☐ Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /21 / /21	/ /24
ACQUIRED DISPOSED	// <u>21</u>
coloresc. Apolitecur	DISPOSED
Comments:	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

FAIR POLITICAL PRACTICES COMMISSION Name

CALIFORNIA FORM

2mes

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Name	Name Name
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
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 /_21 _/_21 /_21 /_21 /_21 /_21 /_21 /_21 /_
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
➤ 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 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 OVER \$100,000 OVER \$100,000
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
	The same state solow
► 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, or 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 <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> 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:
\$10,001 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 ACQUIRED DISPOSED
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
I	36

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION Name

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
None	None
CITY	CITY
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
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	\$100,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$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.	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	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 values of 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)
ADDITEOG (Business Audress Auceptable)	ADDITEGO (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)
% None	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$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
Guarantor, if applicable	Guarantor, if applicable
l	
2	
Comments:	

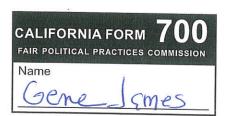
SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

		FORM RACTICES	
Name	注: 是特色的复数形式	的30位的30位	174 E 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

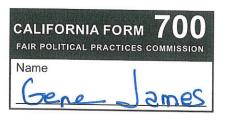
▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
None	None
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
	l same and a same a
GROSS INCOME RECEIVED No Income - Business Position Only	
GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$1,001 - \$10,000	GROSS INCOME RECEIVED No Income - Business Position Only
\$10,001 - \$100,000 OVER \$100,000	\$500 - \$1,000 \$1,001 - \$10,000 \$10,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
Salary Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use	Partnership (Less than 10% ownership: For 10% or greater use
Schedule A-2.)	Schedule A-2.)
Sale of(Real property, car, boat, etc.)	Sale of
Loan repayment	(Real property, car, boat, etc.)
	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)	
Other	(Describe)
(Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE	ERIOD
* You are not required to report loans from a commercial I	ending institution, or any indebtedness created as part of
a retail installment or credit card transaction, made in the	e lender's regular course of business on torms available
to members of the public without regard to your official s	tatus. Personal loans and loans received not in a lander's
regular course of business must be disclosed as follows	:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
, and a second s	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
Joseph Charles And Annual Control of Control	resolial residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City ·
\$1,001 - \$10,000	City .
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
	Other(Describe)
Commonter	, and a second of
Comments:	

SCHEDULE D Income - Gifts



▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)	
San Clemente Chamber of Com	ner	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
1231 Prenta Del Sol San Clemente	Address Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF SOURCE		
BOOMESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S	S)
in 20 2 m	,	
10 28/2021 : 49 Mes	/	
	\$	
	s .	
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)	
BBEK		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
18101 Von Karman Invine CA		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
	ANT, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (MINE)	
10.	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S	3)
94 23,21 No Nes /		
	\$	
/ / «		
	\$	
/ / 0	7 7	
		-
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
3	(Business Audress Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	DUCINECO ACTIVITY IS ANNO 25 CONTRA	
	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/w) VALUE DECORPORATION OF THE		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	727 10	
7 7 ~		
	/	
Comments:		
	,	

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements



- · Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization
 or the "Speech" box if you made a speech or participated in a panel. Per Government Code
 Section 89506, these payments may not be subject to the gift limit. However, they may result
 in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
None	1 None
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
	SITT AND STATE
FOL (a)(2) or DESCRIPE BLICKIESS ACTIVITY IS ANY OF SOLVE	
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/	DATE(S): / /
DATE(S):/	DATE(S):/
► MUST CHECK ONE: Gift -or- Income	\$215 \dots 2000
	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
Section Section Control Contro	Other - Provide Description
▶ If Gift, Provide Travel Destination	N K C T Part I T I I Part I
	▶ If Gift, Provide Travel Destination
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
	[]
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
The control of the co	ADDICESS (Business Address Acceptable)
CITY AND STATE	OLTV AND OTATE
5.7.7.m.D 5.7.m.E	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/	DATE(S): / / ANATIG
(If gift)	DATE(S):/
▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income	▶ MUST CHECK ONE: ☐ Gift -or ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
▶ If Gift, Provide Travel Destination	▶ If Gift, Provide Travel Destination
	Taylor Dodination
Comments	
Comments:	* , A