

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT**

FEB 29 2024

Please type or print in ink.

City Clerk Department

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
KNOBLOCK STEVEN CRAIG

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms) San Clemente City Council Council MEMBER  
Division, Board, Department, District, if applicable Your Position

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)  
Agency Orange County Administrative Hearing Officer Position: Trustee  
Orange County Mosquito and Vector Control District

**2. Jurisdiction of Office (Check at least one box)**

State  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)  
 Multi-County  County of Orange  
 City of San Clemente  Other

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

**Annual:** The period covered is January 1, 2023, through December 31, 2023.  
-or- The period covered is \_\_\_\_\_, through December 31, 2023.  
 **Assuming Office:** Date assumed \_\_\_\_\_  
 **Candidate:** Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_  
 **Leaving Office:** Date Left \_\_\_\_\_ (Check one circle.)  
 The period covered is January 1, 2023, through the date of leaving office.  
-or-  
 The period covered is \_\_\_\_\_, through the date of leaving office.

**4. Schedule Summary (required)**

► Total number of pages including this cover page: 3

**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 Home) [Redacted] SAN CLEMENTE CA [Redacted]

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
[Redacted] [Redacted]

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

Date Signed 2-22-24 Signature [Redacted] (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  
THE SIERRA VISTA/SK TRUST

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:

<input type="checkbox"/> \$0 - \$1,999			
<input type="checkbox"/> \$2,000 - \$10,000		<u>  </u> / <u>  </u> / <u>23</u>	<u>  </u> / <u>  </u> / <u>23</u>
<input type="checkbox"/> \$10,001 - \$100,000		ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000			
<input type="checkbox"/> Over \$1,000,000			

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     Other

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

**▶ 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:

<input type="checkbox"/> \$0 - \$1,999			
<input type="checkbox"/> \$2,000 - \$10,000		<u>  </u> / <u>  </u> / <u>23</u>	<u>  </u> / <u>  </u> / <u>23</u>
<input type="checkbox"/> \$10,001 - \$100,000		ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000			
<input type="checkbox"/> 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

**▶ 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

**▶ 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

WOLFGANG VENTURES, INC. (AZ)  
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
AIR Conditioning Sales/Service  
Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000			
<input type="checkbox"/> \$10,001 - \$100,000		<u>11</u> / <u>17</u> / <u>23</u>	<u>  </u> / <u>  </u> / <u>23</u>
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000		ACQUIRED	DISPOSED
<input type="checkbox"/> 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

**▶ 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:

<input type="checkbox"/> \$2,000 - \$10,000			
<input type="checkbox"/> \$10,001 - \$100,000		<u>  </u> / <u>  </u> / <u>23</u>	<u>  </u> / <u>  </u> / <u>23</u>
<input type="checkbox"/> \$100,001 - \$1,000,000		ACQUIRED	DISPOSED
<input type="checkbox"/> 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: \_\_\_\_\_



Name

Steven Knobloch

SCHEDULE D  
Income = Gifts

▶ NAME OF SOURCE (Not an Acronym)  
San Clemente Chamber of Commerce

ADDRESS (Business Address Acceptable)  
1231 Puerta Del Sol, San Clemente, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
TASTE OF SAN Clemente

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/3/23	\$ 330.00	2 tickets
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)  
San Clemente Chamber of Commerce

ADDRESS (Business Address Acceptable)  
1231 Puerta Del Sol, San Clemente, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
State of the City Luncheon

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5/5/23	\$ 69.00	Luncheon ticket
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)  
PierPride (501(c)3) DINNER

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$ 390.	2 tickets FR Dinner
7/4/23	\$ 194	4 <sup>th</sup> of July
/ /	\$	

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

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