

**STATEMENT OF ECONOMIC INTERESTS City of San Clemente**  
**COVER PAGE**  
**A PUBLIC DOCUMENT**

Received  
Filing Official Use Only  
**AUG 05 2024**  
**City Clerk Department**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Quintanilla Amanda

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

Agency Name (Do not use acronyms)  
City of San Clemente  
Division, Board, Department, District, if applicable  
District 3  
Your Position  
City Council Member Candidate  
► 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  
 Multi-County \_\_\_\_\_  
 City of San Clemente  
 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)  
 County of Orange  
 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 11/05/2024 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: 1

**Schedules attached**

**Schedule A-1 - Investments** – schedule attached  
 **Schedule A-2 - Investments** – schedule attached  
 **Schedule B - Real Property** – schedule attached  
 **Schedule C - Income, Loans, & Business Positions** – schedule attached  
 **Schedule D - Income – Gifts** – 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)  
[Redacted] 92672  
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 the foregoing is true and correct.

Date Signed 8/5/2024  
(month, day, year)

Signature [Redacted]  
(File the originally signed paper statement with your filing official.)