1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City Officials - City Council
Division, Board, Department, District, if applicable
Your Position
Councilmember - 1st District

► 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 Long Beach
☐ County of ________________________________
☐ Other ________________________________

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

☒ Annual: The period covered is January 1, 2021, through December 31, 2021.
-Or-
The period covered is _____/_____/________ through December 31, 2021.
☐ Assuming Office: Date assumed _____/_____/________
☐ Leaving Office: Date Left _____/_____/________

-Or-
The period covered is January 1, 2021, through the date of leaving office.
-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: 1

Schedules attached

☐ Schedule A-1 - Investments – schedule attached
☐ Schedule A-2 - Investments – schedule attached
☐ Schedule B - Real Property – schedule attached
-Or- ☒ None - No reportable interests on any schedule

☐ Schedule C - Income, Loans, & Business Positions – schedule attached
☐ Schedule D - Income – Gifts – schedule attached
☐ Schedule E - Income – Gifts – Travel Payments – schedule attached

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)