

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

Date Received  
Official Use Only

received  
3/16/2011

Gm

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Rikalo Susan Marie

1. Office, Agency, or Court

Agency Name

City Council

Division, Board, Department, District, if applicable

Your Position

City Council member

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

RECEIVED  
CALIFORNIA  
FAIR POLITICAL  
PRACTICES COMMISSION  
1 APR 11 PM 2:35

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

State

Judge (Statewide Jurisdiction)

Multi-County \_\_\_\_\_

County of \_\_\_\_\_

City of Avalon

Other \_\_\_\_\_

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

Annual: The period covered is January 1, 2010, through December 31, 2010.

Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2010.

The period covered is January 1, 2010, through the date of leaving office.

Assuming Office: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

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

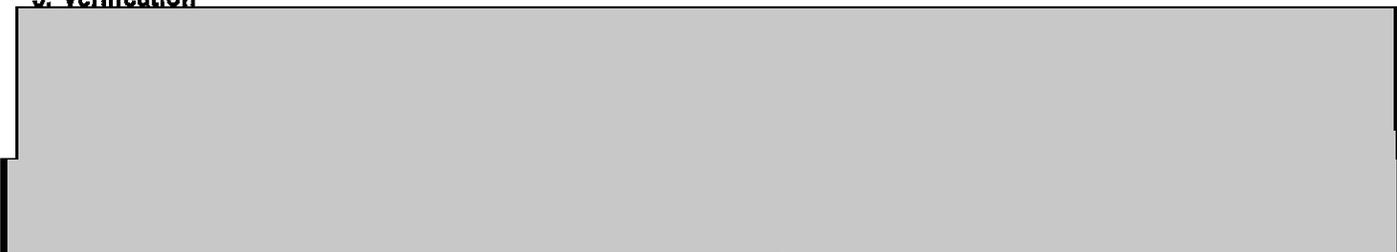
Schedule B - Real Property - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification



I certify under penalty of perjury under the laws of the State of California that

Date Signed 3/16/2011  
(month, day, year)

Signature

received Gm  
03/16/2011

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

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
Susan Rikalo

**▶ 1. BUSINESS ENTITY OR TRUST**

The Steamer Trunk

Name  
PO Box 12 (121 Sumner Ave) Avalon, CA 90704

Address (Business Address Acceptable)

Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

retail gift shop

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000      /      / 10      /      / 10  
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Sole Proprietorship  Partnership  Other

YOUR BUSINESS POSITION Owner

**▶ 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.)**

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT  REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number 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      /      / 10      /      / 10  
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership

Leasehold \_\_\_\_\_  Other \_\_\_\_\_  
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

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

**▶ 1. BUSINESS ENTITY OR TRUST**

DC-3 Gifts and Grill

Name  
#1 Airport Road, Catalina Island 90704

Address (Business Address Acceptable)

Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

restaurant and gift shop

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000      /      / 10      /      / 10  
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Sole Proprietorship  Partnership  Other

YOUR BUSINESS POSITION Owner

**▶ 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.)**

Santa Catalina Island Company  
Art Mood - Jazz Tray Festival

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT  REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number 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      /      / 10      /      / 10  
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership

Leasehold \_\_\_\_\_  Other \_\_\_\_\_  
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

received  
07/16/2011

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
SUSAN RIKALO

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

▶ STREET ADDRESS OR PRECISE LOCATION  
314 Sumner Ave  
CITY  
Avalon  
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000  
ACQUIRED      /      / 10 DISPOSED      /      / 10  
NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_  
Yrs. remaining Other  
IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$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.  
Susan Reeves

▶ STREET ADDRESS OR PRECISE LOCATION  
CITY  
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000  
ACQUIRED      /      / 10 DISPOSED      /      / 10  
NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_  
Yrs. remaining Other  
IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$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.

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*  
ADDRESS (Business Address Acceptable)  
BUSINESS ACTIVITY, IF ANY, OF LENDER  
INTEREST RATE TERM (Months/Years)  
\_\_\_\_\_%  None  
HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\*  
ADDRESS (Business Address Acceptable)  
BUSINESS ACTIVITY, IF ANY, OF LENDER  
INTEREST RATE TERM (Months/Years)  
\_\_\_\_\_%  None  
HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

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