



RECEIVED  
COVER PAGE  
FAIR POLITICAL  
PRACTICES COMMISSION

Amendment

City of Pismo Beach  
City Clerk's Office

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Howell Erik  
2014 MAR -7 PM 4:04  
MAR 04 2014

1. Office, Agency, or Court Received

Agency Name (Do not use acronyms)  
City of Pismo Beach  
Division, Board, Department, District, if applicable  
Your Position  
Council Member

► 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 Pismo Beach
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2013, through December 31, 2013.
- or-
- The period covered is \_\_\_\_\_, through December 31, 2013.
- Assuming Office: Date assumed 12 / 5 / 12
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
- The period covered is January 1, 2013, through the date of leaving office.
- The period covered is \_\_\_\_\_, through the date of leaving office.
- Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

- 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



I certify under penalty of perjury under the laws of the State of California that the information herein and in any attached schedules is true and complete. I acknowledge this is

Date Signed February 28, 2014 Signature \_\_\_\_\_  
(month, day, year)

# SCHEDULE A-2

## Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

Name  
Erik Howell

**1. BUSINESS ENTITY OR TRUST**

Law Office of Erik Howell  
Name

203 Placentia Avenue, Pismo Beach, CA 9349  
Address (Business Address Acceptable)

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

**GENERAL DESCRIPTION OF THIS BUSINESS**

Law Practice

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$0 - \$1,999	<u>   </u> / <u>   </u> / <u>13</u>	<u>   </u> / <u>   </u> / <u>13</u>
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input checked="" type="checkbox"/> \$10,001 - \$100,000		
<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 Attorney

**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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Check one box:  
 INVESTMENT             REAL PROPERTY

None

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	<u>   </u> / <u>   </u> / <u>13</u>	<u>   </u> / <u>   </u> / <u>13</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 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**

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	<u>   </u> / <u>   </u> / <u>13</u>	<u>   </u> / <u>   </u> / <u>13</u>
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
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YOUR BUSINESS POSITION \_\_\_\_\_

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 \$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.)**

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**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

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FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
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NATURE OF INTEREST  
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 Leasehold \_\_\_\_\_     Other \_\_\_\_\_  
Yrs. remaining

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

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

City of Pismo Beach  
City Clerk's Office  
Date Received  
Official Use Only  
DEC 07 2012

Received

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Howell Erik

1. Office, Agency, or Court

Agency Name  
City of Pismo Beach  
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Your Position  
City Council Member

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

Annual: The period covered is January 1, 2011, through December 31, 2011.  
-or-  
The period covered is \_\_\_\_\_ through December 31, 2011.  
 Assuming Office: Date assumed 12 / 4 / 2012  
 Leaving Office: Date Left \_\_\_\_\_ (Check one)  
 The period covered is January 1, 2011, through the date of leaving office.  
 The period covered is \_\_\_\_\_ through the date of leaving office.  
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-or-  
 None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
DAYTIME TELEPHONE NUMBER ( ) E-MAIL ADDRESS (OPTIONAL)

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 12/7/12  
(month, day, year)

Signature [Redacted]

