

STATEMENT OF ECONOMIC INTERESTS
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FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE



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Please type or print in ink.

NAME OF FILER (LAST) DESMOND (FIRST) JAMES (MIDDLE) M.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
CITY OF SAN MARCOS
Division, Board, Department, District, if applicable
CITY COUNCIL Your Position
MAYOR

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: SEE ATTACHED Position: _____

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

- State
- Multi-County _____
- City of SAN MARCOS
- 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 _____
- 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: 3
- 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 foregoing is true and correct.

Date Signed 2/4/2014
(month, day, year)

CALIFORNIA FORM 700

Attachment for James M. Desmond

Annual – January 1, 2013 through December 31, 2013

1. Additional Agency Positions:

San Marcos Fire Protection District

San Marcos Mobilehome Rent Review Commission

San Marcos Public Facilities Authority

San Marcos Public Financing Authority

Discovery Valley Utility

California Mobilehome Park Financing Authority

Successor Agency to the former San Marcos Redevelopment Agency

Successor Housing Agency to the former San Marcos Redevelopment Agency

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
JAMES M. DESMOND

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
602 MAYBRITT CIRCLE

CITY
SAN MARCOS, CA 92069

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 / /13 DISPOSED / /13

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.
 None
ROD & ANNA MARIE WADDS

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
640 MAYBRITT CIRCLE

CITY
SAN MARCOS, CA 92069

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 / /13 DISPOSED / /13

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.
 None
BARBARA KARPINSKI

* 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 _____% None TERM (Months/Years) _____

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 _____% None TERM (Months/Years) _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

Guarantor, if applicable

Comments: _____

