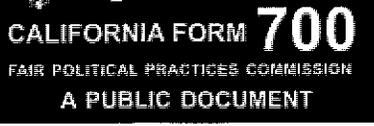


City Council Member



STATEMENT OF ECONOMIC INTERESTS

COVER PAGE



Date Received
Official Use Only

E-Filed
01/30/2014
15:42:25
Filing ID:
149407563

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Schumacher, Michael

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Carlsbad
Division, Board, Department, District, if applicable
PLANNING COMMISSION
Your Position
Commission Member

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

Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS
Position:

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

State
 Multi-County
 City of Carlsbad
 Judge or Court Commissioner (Statewide Jurisdiction)
 County of San Diego
 Other

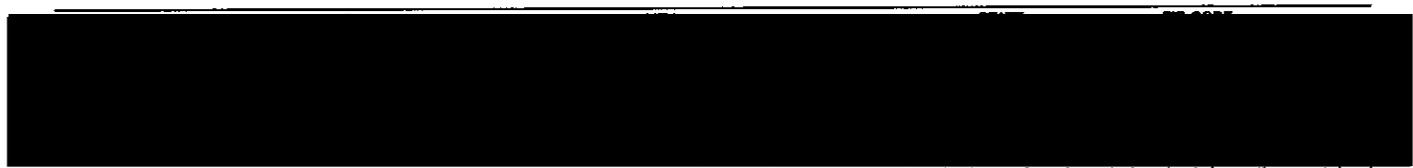
3. Type of Statement (Check at least one box)

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."
 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
► Total number of pages including this cover page: 1

5. Verification



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 01/30/2014
(month, day, year)

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

Section 1 Additional Agency(ies)/Position(s) for Schumacher, Michael:

Agency	Division, Board, Department, District	Position
CITY OF CARLSBAD	Ag. Conv. Mitigation Fee Advisory Comm.	Committee Member