

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received



COVER PAGE

CITY OF SOUTH EL MONTE  
CITY CLERK'S OFFICE

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2015 MAR 31 A 11:24  
CITY OF SOUTH EL MONTE  
CITY CLERK'S OFFICE

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Aguinaga Luis A.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of South El Monte

Mayor

Division, Board, Department, District, if applicable

Your Position

City of South El Monte Parking Authority/Financing Authority

Commissioner

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

Agency: (See Attachment)

Position:

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
2015 APR -6 PM 3:11

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

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

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

City of South El Monte

Other \_\_\_\_\_

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

Annual: The period covered is January 1, 2014, through December 31, 2014.

Leaving Office: Date Left 05 / 27 / 2014  
(Check one)

-or-

The period covered is \_\_\_\_\_ through December 31, 2014.

The period covered is January 1, 2014, through the date of leaving office.

Assuming Office: Date assumed \_\_\_\_\_

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: 6

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

Date Signed 03/24/2015

(month, day, year)

**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  
Luis Aguinaga

**1. BUSINESS ENTITY OR TRUST**

Servo Parts Co.  
 Name  
 1055 Farmer Avenue  
 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	____/____/14    ____/____/14
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED                      DISPOSED
<input 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 \_\_\_\_\_

**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    or     Names listed below

L.A. Core

**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

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/14    ____/____/14
<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 \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

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

**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	____/____/14    ____/____/14
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED                      DISPOSED
<input 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 \_\_\_\_\_

**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    or     Names listed below

**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

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/14    ____/____/14
<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 \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

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

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



**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Luis Aguinaga
--

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
 Servo Parts Co.

ADDRESS (Business Address Acceptable)  
 1055 Farmer Avenue

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION  
 Owner

GROSS INCOME RECEIVED  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 (For self-employed use Schedule A-2.)  
 Partnership (Less than 10% ownership. For 10% or greater use  
 Schedule A-2.)  
 Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)  
 Loan repayment  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 (Describe)  
 Other Broker  
 \_\_\_\_\_  
 (Describe)

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 (For self-employed use Schedule A-2.)  
 Partnership (Less than 10% ownership. For 10% or greater use  
 Schedule A-2.)  
 Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)  
 Loan repayment  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 (Describe)  
 Other \_\_\_\_\_  
 (Describe)

**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)		
_____		
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
	<input type="checkbox"/> Real Property _____	Street address
		_____
		City
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Other _____	(Describe)
<input type="checkbox"/> \$1,001 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000		

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

**SCHEDULE D  
Income – Gifts**

Name  
Luis Aguinaga

▶ NAME OF SOURCE (Not an Acronym)  
Athens Services

ADDRESS (Business Address Acceptable)  
14048 E. Valley Blvd

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Solid Waste Co.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 20 / 14</u>	<u>\$ 30.00</u>	<u>Turkey</u>
<u>12 / 23 / 14</u>	<u>\$ 50.00</u>	<u>Honey Baked Hal</u>
<u>05 / 12 / 14</u>	<u>\$ 175.00</u>	<u>Golf Tournament Entry</u>

▶ NAME OF SOURCE (Not an Acronym)  
Arroyo Strategy Group

ADDRESS (Business Address Acceptable)  
10854 Central Avenue

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 24 / 14</u>	<u>\$ 50.00</u>	<u>Gift Basket</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)  
Richards, Watson & Gershon

ADDRESS (Business Address Acceptable)  
355 S. Grand Avenue

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
City Attorney

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 02 / 13</u>	<u>\$ 16.52</u>	<u>Dinner</u>
<u>12 / 01 / 14</u>	<u>\$ 59.90</u>	<u>Holiday Gift</u>
<u>05 / 27 / 14</u>	<u>\$ 15.37</u>	<u>Dinner</u>

▶ NAME OF SOURCE (Not an Acronym)  
Richards, Watson & Gershon

ADDRESS (Business Address Acceptable)  
355 S. Grand Avenue

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
City Attorney

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 16 / 14</u>	<u>\$ 22.16</u>	<u>Lunch</u>
<u>05 / 15 / 14</u>	<u>\$ 189.96</u>	<u>Dinner</u>
<u>05 / 14 / 14</u>	<u>\$ 10.67</u>	<u>Drinks</u>

▶ NAME OF SOURCE (Not an Acronym)  
Richards, Watson & Gershon

ADDRESS (Business Address Acceptable)  
355 S. Grand Avenue

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
City Attorney

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 25 / 14</u>	<u>\$ 7.33</u>	<u>Drinks</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)  
Anthony R. Ybarra

ADDRESS (Business Address Acceptable)  
1415 Santa Anita Avenue

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
City Manager

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 22 / 14</u>	<u>\$ 40.00</u>	<u>Gift Basket</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

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

**2014 EXPANDED  
STATEMENT OF ECONOMIC INTEREST  
FORM 700**

PARKING AUTHORITY/FINANCING AUTHORITY CITY OF SOUTH EL MONTE	COMMISSIONER
SUCCESSOR AGENCY TO THE SOUTH EL MONTE IMPROVEMENT DISTRICT	BOARD MEMBER
CALIFORNIA JOINT POWERS INSURANCE	DELEGATE
SAN GABRIEL BASIN WATER QUALITY AUTHORITY	BOARD MEMBER
SAN GABRIEL VALLEY COUNCIL OF GOVERNMENTS	BOARD OF DIRECTOR/ALTERNATE
SANITATION DISTRICT NO. 15 OF LOS ANGELES COUNTY	DIRECTOR
SOUTHEAST AREA ANIMAL CONTROL AUTHORITY	COMMISSIONER
SOUTHERN CALIFORNIA ASSOCIATION OF GOVERNMENTS	BOARD MEMBER/ALTERNATE



3/26/2015  
DATE