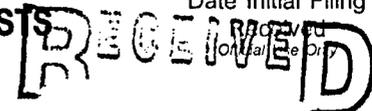




STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing



RECEIVED COVER PAGE  
FAIR POLITICAL PRACTICES COMMISSION

APR 01 2015

Please type or print in ink.

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

Lopez

2015 APR 13 PM 2:32  
Antonio

CITY CLERK  
CITY OF SAN FERNANDO

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of San Fernando

Councilmember

Division, Board, Department, District, if applicable

Your Position

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

Agency: Los Angeles Metro

Position: Councilmember

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

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

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

City of San Fernando

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 \_\_\_\_/\_\_\_\_/\_\_\_\_  
(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: 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

Date Signed 03/31/2015  
(month, day, year)

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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
 Antonio Lopez

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME  
 Schelemmer+Algaze+Associates, Inc.

ADDRESS (Business Address Acceptable)  
 6083 Bristol Pkwy., Culver City, CA. 90230

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Architectural Firm

YOUR BUSINESS POSITION  
 Project Manager

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)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME  
 Lopez Masonry Co., Inc.

ADDRESS (Business Address Acceptable)  
 15149 Kingsbury St. Mission Hills, CA 91340

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Construction Company

YOUR BUSINESS POSITION  
 Vice President

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 **Owner Interest** \_\_\_\_\_  
 (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\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

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

INTEREST RATE \_\_\_\_\_%       None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN  
 None       Personal residence

Real Property \_\_\_\_\_  
 \_\_\_\_\_  
 Street address  
 \_\_\_\_\_  
 City

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
 (Describe)

C mments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
**Antonio Lopez**

▶ NAME OF SOURCE (Not an Acronym)  
**Robertson Properties Group**  
 ADDRESS (Business Address Acceptable)  
**120 N. Roberson Blvd., Los Angeles, 90048**  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Real Estate**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 07 / 14	\$ 250.00	Movie Pass
06 / 20 / 14	\$ 100.00	Movie Tickets
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Republic Services**  
 ADDRESS (Business Address Acceptable)  
**9200 Glenoaks Blvd., Sun Valley, CA 91352**  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Waste Management**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 04 / 14	\$ 260.00	Sporting Event
10 / 27 / 14	\$ 125.00	Golf Tournament
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Otto Enviromental**  
 ADDRESS (Business Address Acceptable)  
**901 N Tweedy Rd, Eloy, AZ 85131**  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Waste and Recycle Products**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 10 / 14	\$ 150.00	Golf Tournament
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Olivarez Madruga, LLP**  
 ADDRESS (Business Address Acceptable)  
**1100 S Flower St # 2100, Los Angeles, CA 90015**  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Attorneys**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 29 / 14	\$ 125.00	Golf Tournament
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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