



RECEIVED
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CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

RECEIVED
POLITICAL
ES CO STATEMENT OF ECONOMIC INTERESTS

14 PH 1:26

COVER PAGE

15 MAY -7 P3 29

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Norwalk

Division, Board, Department, District, if applicable
Administration

Your Position
City Council

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

Agency: **See attached**

Position: **See attached**

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of **Los Angeles**

City of **Norwalk**

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: **4**

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

I certify under penalty of perjury under the laws of the

05/5/15

Date Signed _____
(month, day, year)

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION

2015 MAY 14 PM 1:26

Michael Mendez
Expanded Annual Statement
January 1 through December 31, 2014

Board member
Board member
Board member
Alternate

Successor Agency to the Norwalk Redevelopment Agency
Commerce Refuse-to-Energy Authority
I-5 Consortium Cities Joint Powers Authority
LA County Sanitation District Nos. 2 & 18

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION

2015 MAY 14 PM 1:26

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

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)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Universal Waste Systems

ADDRESS (Business Address Acceptable)
9016 Norwalk Blvd., Santa Fe Springs, Ca
BUSINESS ACTIVITY, IF ANY, OF SOURCE 90670

YOUR BUSINESS POSITION
Consultant

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)

Comments: _____

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)

Filer's Verification

Print Name _____ Office, Agency or Court _____

Statement Type 2014/2015 Annual _____ Annual Assuming Leaving Candidate
(v)

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed _____ Filer's Signature _____
(month, day, year)

RECEIVED
 FAIR POLITICAL
 PRACTICES COMMISSION
SCHEDULE D
 2015 MAY 14 **Income - Gifts**

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name
Michael Mendez

▶ NAME OF SOURCE (Not an Acronym)
Richards, Watson & Gershon Law Firm
 ADDRESS (Business Address Acceptable)
355 S. Grand Ave., 40th Floor, Los Angeles
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Dinner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5/16/14</u>	<u>\$399.96</u>	<u>Dinner</u>
<u> </u>	<u>\$ </u>	<u> </u>
<u> </u>	<u>\$ </u>	<u> </u>

▶ 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)
<u> </u>	<u>\$ </u>	<u> </u>
<u> </u>	<u>\$ </u>	<u> </u>
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<u> </u>	<u>\$ </u>	<u> </u>
<u> </u>	<u>\$ </u>	<u> </u>

Comments: _____

STATEMENT OF ECONOMIC INTERESTS



COVER PAGE

Date Initial Filing Received
RECEIVED
CITY OF NORWALK
CITY CLERK

Please type or print in ink.

NAME OF FILER (LAST) (FIRST)
Mendez Michael

15 MAR 20 11:12

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Norwalk

Division, Board, Department, District, if applicable

Administration

Your Position

City Council

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

Agency: see attached

Position: see attached

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PRACTICES COMMISSION
2015 APR -2 PM 1:32

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of Norwalk

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-
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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

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

3-20-15

(month, day, year)

Michael Mendez
Expanded Annual Statement
January 1 through December 31, 2014

Board member
Board member
Board member
Alternate

Successor Agency to the Norwalk Redevelopment Agency
Commerce Refuse-to-Energy Authority
I-5 Consortium Cities Joint Powers Authority
LA County Sanitation District Nos. 2 & 18

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
Michael Mendez

▶ 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)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Universal Waste Systems

ADDRESS (Business Address Acceptable)
9016 Norwalk Blvd., Santa Fe Springs, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 _____ 90670

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

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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 TERM (Months/Years)

_____ % None _____

SECURITY FOR LOAN
 None Personal residence

Real Property _____
 Street address

 City

Guarantor _____

Other _____
 (Describe)

Comments: _____

SCHEDULE D
Income – Gifts

Name
Michael Mendez

▶ NAME OF SOURCE (Not an Acronym)
Richards, Watson & Gershon Law Firm
 ADDRESS (Business Address Acceptable)
355 S. Grand Ave., 40th Floor, Los Angeles
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Dinner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5 / 16 / 14</u>	<u>\$ 399.96</u>	<u>Dinner</u>
<u> / / </u>	<u> \$ </u>	<u> </u>
<u> / / </u>	<u> \$ </u>	<u> </u>

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 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u> \$ </u>	<u> </u>
<u> / / </u>	<u> \$ </u>	<u> </u>
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<u> / / </u>	<u> \$ </u>	<u> </u>

Comments: _____