



CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 A PUBLIC DOCUMENT

RECEIVED
 FAIR POLITICAL PRACTICES COMMISSION
STATEMENT OF ECONOMIC INTERESTS
 RECEIVED
 15 FEB -9 PM 5:2
COVER PAGE

Date Initial Filing
 Received
 Official Use Only

Please type or print in ink.

15 JAN 30 P6:07

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Miesen Steven CITY OF CHULA VISTA
 CITY CLERK'S OFFICE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
 City of Chula Vista
 Division, Board, Department, District, if applicable
 City Council
 Your Position
 City Council Member
 ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
 Agency: _____ Position: _____

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

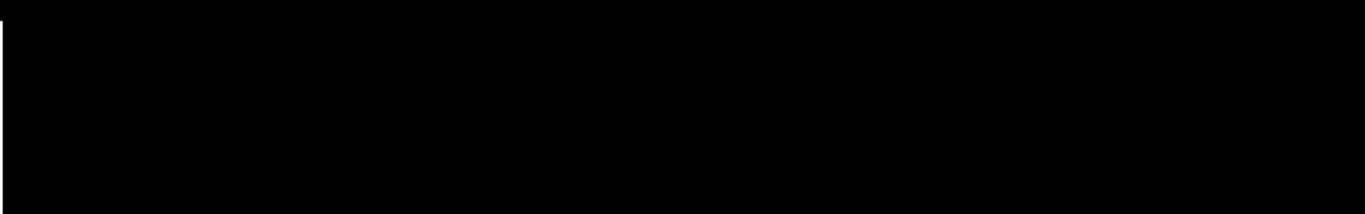
State Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of Chula Vista Other _____

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

Annual: The period covered is January 1, 2014, through December 31, 2014.
 -or-
 The period covered is ____/____/____ through December 31, 2014.
 Assuming Office: Date assumed 01 / 13 / 2015
 Leaving Office: Date Left ____/____/____ (Check one)
 The period covered is January 1, 2014, 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 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 have used all reasonable diligence in preparing this statement. I have reviewed the information herein and in any attached schedules is true and complete. I acknowledge the accuracy of the information herein and certify under penalty of perjury under the laws of the State of California that the information is true and complete.

Date Signed 01/30/2015
 (month, day, year)

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

Name
 Steven Lee Miesen

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Republic Services

ADDRESS (Business Address Acceptable)
881 Energy Way, Chula Vista, CA 91911

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Waste and Recycling Services

YOUR BUSINESS POSITION
Division 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
Chula Vista Elementary School District

ADDRESS (Business Address Acceptable)
84 East J St., Chula Vista, CA 91910

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Elementary School

YOUR BUSINESS POSITION
Teacher Aide

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* _____

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)

Comments: _____

**SCHEDULE A-1
Investments**

Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

<p>CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION</p> <p>Name Steven Lee Miesen</p>
--

▶ **NAME OF BUSINESS ENTITY**
Seacoast Bank Stock

GENERAL DESCRIPTION OF THIS BUSINESS
Local Bank

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **14** _____ / _____ / **14**
 ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **14** _____ / _____ / **14**
 ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **14** _____ / _____ / **14**
 ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **14** _____ / _____ / **14**
 ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **14** _____ / _____ / **14**
 ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / **14** _____ / _____ / **14**
 ACQUIRED DISPOSED

Comments: _____