



STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

OFFICE OF CITY CLERK
CITY OF EL CENTRO

Please type or print in ink.

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

1. Office, Agency, or Court

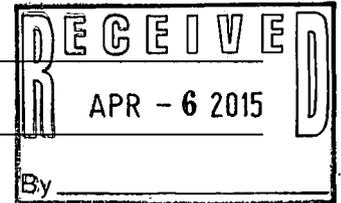
Agency Name (Do not use acronyms)

Member of City Council. El Centro

Council Member

Division, Board, Department, District, if applicable

Your Position



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

Agency: City Council, Successor Agency, Successor Housing Agency

Position:

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

- State, Multi-County, City of El Centro, Judge or Court Commissioner, County of, Other

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

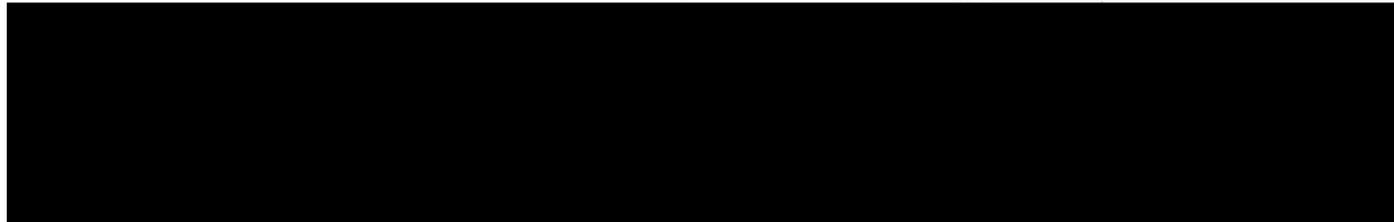
- Annual: The period covered is January 1, 2014, through December 31, 2014. Leaving Office: Date Left, The period covered is January 1, 2014, through the date of leaving office. Assuming Office: Date assumed, The period covered is through the date of leaving office. Candidate: Election year and office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page:

- Schedule A-1 - Investments, Schedule A-2 - Investments, Schedule B - Real Property, Schedule C - Income, Loans, & Business Positions, Schedule D - Income - Gifts, Schedule E - Income - Gifts - Travel Payments, None - No reportable interests on any schedule



herein and in any attached schedules is true and complete. I acknowledge

I certify under penalty of perjury under the laws of the State of California

Date Signed 04/02/2015 (month, day, year)

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name _____

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Court Appointed Special Advocates (CASA)

ADDRESS (Business Address Acceptable)
229 South 8th Street Suite B El Centro, Ca 92243

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-Profit-Child Advocacy

YOUR BUSINESS POSITION
Executive Director

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
University of Phoenix

ADDRESS (Business Address Acceptable)
3095 N. Imperial Suite 101 El Centro, Ca 92243

BUSINESS ACTIVITY, IF ANY, OF SOURCE
College Education

YOUR BUSINESS POSITION
Lead Instructor

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 TERM (Months/Years)
 _____% None _____

SECURITY FOR LOAN
 None Personal residence

Real Property _____

 Street address

 City

Guarantor _____

Other _____
 (Describe)

Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____

▶ NAME OF SOURCE *(Not an Acronym)*
Christ Community Church

ADDRESS *(Business Address Acceptable)*
585 Orange Ave El Centro, Ca 92243

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Faith Base-Children's Ministry Director

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 31 / 13</u>	<u>\$ 2,600.00</u>	<u>Annual Stipend</u>
<u>12 / 31 / 14</u>	<u>\$ 2,600.00</u>	<u>Annual Stipend</u>
<u>02 / 28 / 15</u>	<u>\$ 400.00</u>	<u>Annual Stipend</u>

▶ NAME OF SOURCE *(Not an Acronym)*
City of El Centro

ADDRESS *(Business Address Acceptable)*
1275 Main Street

BUSINESS ACTIVITY, IF ANY, OF SOURCE
City Council Member

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 31 / 14</u>	<u>\$ 850.00</u>	<u>Stipend</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>
<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>
<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>
<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>
<u> / / </u>	<u>\$ _____</u>	<u>_____</u>

Comments: _____

RECEIVED

AT 1 AN 2014

MAY 28 2015

SCHEDULE C
Income, Loans, & Business Positions



CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

OFFICE OF CITY CLERK
CITY OF EL CENTRO

(Other than Gifts and Travel Payments)

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
MAY 15 11:44 AM - 1 PM 1:44

1. INCOME RECEIVED
NAME OF SOURCE OF INCOME: Christ Community Church
ADDRESS: 585 Orange Ave El Centro, Ca 92243
BUSINESS ACTIVITY: Children Ministry Director
YOUR BUSINESS POSITION: Children Ministry Director
GROSS INCOME RECEIVED: \$1,001 - \$10,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED: Other Travel Annual Stipend for Church Activities

1. INCOME RECEIVED
NAME OF SOURCE OF INCOME
ADDRESS
BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION
GROSS INCOME RECEIVED
CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Comments: Travel Annual Stipend is related to Home Visitations concerning children

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 ACTIVITY, IF ANY, OF LENDER
HIGHEST BALANCE DURING REPORTING PERIOD

INTEREST RATE
TERM (Months/Years)
SECURITY FOR LOAN
Guarantor
Other

Filer's Verification
Date Signed: 05/15/2015