CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
Official Use Only

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
'11 APR -1 P4:54
11 APR 8 PM 3:55
CITY OF CHULA VISTA
CITY CLERK'S OFFICE

Please type or print in ink.

NAME OF FILER (LAST): Castaneda
(FIRST): Steve
(MIDDLE):

1. Office, Agency, or Court

Agency Name: City of Chula Vista

Division, Board, Department, District, if applicable: City Council

Your Position: Councilmember

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

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

- ☐ State
- ☐ Multi-County _____
- ☒ City of Chula Vista
- ☐ Judge (Statewide Jurisdiction)
- ☐ County of _____
- ☐ Other _____

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

☒ **Annual:** The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is ____/____/____, through December 31, 2010.

☐ **Assuming Office:** Date ____/____/____

☐ **Candidate:** Election Year _____ Office sought, if different than Part 1: _____

☐ **Leaving Office:** Date Left ____/____/____ *(Check one)*

○ The period covered is January 1, 2010, through the date of leaving office.

○ The period covered is ____/____/____, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

► **Total number of pages including this cover page:** 7

- ☐ **Schedule A-1** - *Investments* – schedule attached
- ☒ **Schedule A-2** - *Investments* – schedule attached
- ☒ **Schedule B** - *Real Property* – schedule attached
- ☒ **Schedule C** - *Income, Loans, & Business Positions* – schedule attached
- ☒ **Schedule D** - *Income – Gifts* – 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

Date Signed 03/25/2011 *(month, day, year)*

Signatur

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: Steve Castaneda

▶ 1. BUSINESS ENTITY OR TRUST

Name: Profile Research & Marketing

Address *(Business Address Acceptable)*

Check one
☐ Trust, *go to 2* ☐ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INVESTMENT
☒ Sole Proprietorship ☐ Partnership ☐ _____ 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
☐ $500 - $1,000
☐ $1,001 - $10,000
☒ $10,001 - $100,000
☐ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

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

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

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

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▶ 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 BUSINESS ACTIVITY

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

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☐ _____ Other

YOUR BUSINESS POSITION _____

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☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

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

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

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: _____

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Steve Castaneda

SCHEDULE B
Interests in Real Property
(Including Rental Income)

▶ STREET ADDRESS OR PRECISE LOCATION
1845 Bayview Heights Dr.

CITY
San Diego

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

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INTEREST
- ☒ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold ____ Yrs. remaining
- ☐ ____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

▶ STREET ADDRESS OR PRECISE LOCATION

CITY

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

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INTEREST
- ☐ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold ____ Yrs. remaining
- ☐ ____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

* You are not required to report loans from commercial lending institutions 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

INTEREST RATE ____% ☐ None

TERM (Months/Years)

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

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE ____% ☐ None

TERM (Months/Years)

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

☐ Guarantor, if applicable

Comments:

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Steve Castaneda

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME: San Diego Union-Tribune

ADDRESS *(Business Address Acceptable)*: 350 Camino de la Reina

BUSINESS ACTIVITY, IF ANY, OF SOURCE: Media Organization

YOUR BUSINESS POSITION: Journalist

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
- ☐ Loan repayment
- ☐ Partnership
- ☐ Sale of _____ *(Property, car, boat, etc.)*
- ☐ Commission or
- ☐ Rental Income, *list each source of $10,000 or more*
- ☐ Other _____ *(Describe)*

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME: Profile Research & Marketing

ADDRESS *(Business Address Acceptable)*: POB 1117 Chula Vista, CA 91912

BUSINESS ACTIVITY, IF ANY, OF SOURCE: Research Company

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
- ☐ Loan repayment
- ☐ Partnership
- ☐ Sale of _____ *(Property, car, boat, etc.)*
- ☐ Commission or
- ☐ Rental Income, *list each source of $10,000 or more*
- ☐ 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: _____

CALIFORNIA FORM 700
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Name: Steve Castaneda

SCHEDULE D
Income – Gifts

► NAME OF SOURCE
National Electric Contractor Assoc.
ADDRESS (Business Address Acceptable)
9350 Waxie Way, #540 S.D., CA 92123
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Business Assoc.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 09 / 10	$ $200.00	Dinner Tickets
/ /	$	
/ /	$	

► NAME OF SOURCE
Planned Parenthood of San Diego, Inc.
ADDRESS (Business Address Acceptable)
1075 Camino del Rio, S. S.D., CA 92108
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Healthcare Non Profit Organizatio

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 21 / 10	$ 60.00	Event Tickets
04 / 22 / 10	$ 100.00	Event Tickets
/ /	$	

► NAME OF SOURCE
Neighborhood Market Assoc.
ADDRESS (Business Address Acceptable)
8923 La Mesa Blvd. La Mesa, CA 91941
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Business Assoc.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 22 / 10	$ 250.00	Dinner Tickets
02 / 02 / 10	$ 15.00	Lunch
/ /	$	

► NAME OF SOURCE
Vibra Bank
ADDRESS (Business Address Acceptable)
530 Broadway, Chula Vista, CA 91910
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Financial Institution

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 22 / 10	$ 85.00	Dinner Tickets
/ /	$	
/ /	$	

► NAME OF SOURCE
Northgate Markets, Inc.
ADDRESS (Business Address Acceptable)
1201 N.Magnolia Ave. Anaheim, CA 92801
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Grocery Company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 11 / 10	$ 250.00	Dinner Tickets
/ /	$	
/ /	$	

► NAME OF SOURCE
San Diego Gas & Electric
ADDRESS (Business Address Acceptable)
8330 Century Park Court, S.D., CA 92123
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Utlity

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 20 / 10	$ 300.00	Dinner Tickets
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Steve Castaneda

SCHEDULE D
Income – Gifts

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Otay Water District	10777 Del Rio Rd, Spring Valley, CA 91978	Special District	03/27/10	$ 300.00	Dinner Tickets
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Walk San Diego	740 13th Street, Ste. 220 San Diego, CA 92101	Advocacy Organization	04/22/10	$ 55.00	Event Ticket
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Jaime Bonilla	296 Third Ave. Chula Vista, CA 91910	Media Corporation Owner	05/25/10	$ 325.00	Sporting Event Ticket
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Environmental Health Coalition	2727 Hoover Avenue National City, CA 91950	Advocacy Organization	10/02/10	$ 100.00	Dinner Ticket
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Mainly Mozart	2802 Juan Street San Diego, CA 92110	Arts & Culture Organization	12/04/10	$ 80.00	Event Ticket
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
American Public Works Association	3916 Normal Street San Diego, CA 92103	Business Association	10/16/10	$ 250.00	Dinner Tickets
			/ /	$	
			/ /	$	

Comments:

Clear Sch. D | Print Form | specify pages to print

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Steve Castaneda

SCHEDULE D
Income – Gifts

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
South Bay Community Services	1124 Bay Boulevard Chula Vista, CA 91911	Non-Profit Organization	10/23/10	$225.00	Event Ticket
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Otay Mesa Chamber of Commerce	9163 Siempre Viva Rd. San Diego, CA 92154	Business Organization	10/28/10	$125.00	Dinner Tickets
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Pacific Southwest Assoc of Realtors	8880 Canarios Ct. Chula Vista, CA 91910	Business Association	11/02/10	$125.00	Dinner Ticket
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
San Diego Gas & Electric	8330 Century Park Court San Diego, CA 92123	Utility	12/09/10	$50.00	Lunch
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Asian Business Association of San Diego	5675 Ruffin Road San Diego, CA 92123	Business Association	11/18/10	$125.00	Dinner Ticket
			/ /	$	
			/ /	$	

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Chila Vista Police Officers Association	49 3rd Avenue Chula Vista, CA 91910	Employee Association	12/10/10	$125.00	Dinner Ticket
			/ /	$	
			/ /	$	

Comments:

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