STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

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

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
City of San Jacinto
Division, Board, Department, District, if applicable
Councilmember
Your Position

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
☐ Multi-County
☐ City of San Jacinto
☐ County of ____________________________
☐ Other ____________________________

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2019, through December 31, 2019.
☐ Leaving Office: Date Left ___________ / _________ / _________
☐ -or- The period covered is ___________ / _________ / _________, through
December 31, 2019.
☐ -or-
☐ Assuming Office: Date assumed ___________ / _________ / _________
☐ -or-
☐ Candidate: Date of Election ___________ / _________ / _________ and office sought, if different than Part 1:

4. Schedule Summary (must complete)
Total number of pages including this cover page: ____________________________

☐ 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

☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
( )

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 acknowledge this is a public document.

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

Date Signed ___________ / _________ / _________ Signature ____________________________
(month, day, year) (File the originally signed paper statement with your filing official.)

FPPC Form 700 - Cover Page (2019/2020)
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page - 5