

COVER PAGE

A PUBLIC DOCUMENT

Filed Date: 05/25/2020 10:45 AM
SAN: FPPC

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Bernstein Allan L

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Tustin
Division, Board, Department, District, if applicable 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, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of Tustin Other _____

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

Annual: The period covered is January 1, 2019, through December 31, 2019.
-or- The period covered is _____, through December 31, 2019.
 Assuming Office: Date assumed _____
 Candidate: Date of Election _____ and office sought, if different than Part 1: _____
 Leaving Office: Date Left _____ (Check one circle.)
 The period covered is January 1, 2019, through the date of leaving office.
-or-
 The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 5

Schedules attached

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**

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
300 Centennial Way Tustin CA 92780-3715
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
[REDACTED] [REDACTED]

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 05/25/2020 10:45 AM Signature Electronic Submission
(month, day, year) (File the originally signed paper statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name

Allan Bernstein

▶ NAME OF BUSINESS ENTITY
MEDTRONIC

GENERAL DESCRIPTION OF THIS BUSINESS
MEDICAL TECHNOLOGY

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:
 ____/____/19 ____/____/19
 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

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 ACQUIRED DISPOSED

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IF APPLICABLE, LIST DATE:
 ____/____/19 ____/____/19
 ACQUIRED DISPOSED

Comments: _____

COVER PAGE

A PUBLIC DOCUMENT

Filed Date: 03/05/2020 02:28 PM
SAN: FPPC

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Clark Letitia

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Tustin
Division, Board, Department, District, if applicable 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, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of Tustin 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 ____/____/____ (Check one circle.)
- or- The period covered is ____/____/____, through December 31, 2019. The period covered is January 1, 2019, through the date of leaving office.
- Assuming Office: Date assumed ____/____/____ -or- The period covered is ____/____/____, through the date of leaving office.
- 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: 1

Schedules attached

- 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
300 Centennial Way Tustin CA 92780-3715
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(714) 573-3025

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 03/05/2020 02:28 PM Signature Electronic Submission
(month, day, year) (File the originally signed paper statement with your filing official.)

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A PUBLIC DOCUMENT

Filed Date: 05/27/2020 10:51 AM
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Cooper Barry W

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Tustin
Division, Board, Department, District, if applicable 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, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of Tustin Other _____

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

Annual: The period covered is January 1, 2019, through December 31, 2019.
-or- The period covered is 12 / 04 / 2018, through December 31, 2019.
 Assuming Office: Date assumed _____
 Candidate: Date of Election _____ and office sought, if different than Part 1: _____
 Leaving Office: Date Left _____ (Check one circle.)
 The period covered is January 1, 2019, through the date of leaving office.
-or-
 The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 1

Schedules attached

Schedule A-1 - Investments – schedule attached **Schedule C - Income, Loans, & Business Positions** – schedule attached
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-or- **None - No reportable interests on any schedule**

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(Business or Agency Address Recommended - Public Document)
300 Centennial Way Tustin CA 92780-3715
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(714) 573-3025

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Date Signed 05/27/2020 10:51 AM Signature Electronic Submission
(month, day, year) (File the originally signed paper statement with your filing official.)

COVER PAGE

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Filed Date: 03/24/2020 08:09 AM
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Lumbard Austin J

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Tustin
Division, Board, Department, District, if applicable 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, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of Tustin 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 ____/____/____ (Check one circle.)
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- Assuming Office: Date assumed ____/____/____ -or- The period covered is ____/____/____, through the date of leaving office.
- 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: 2

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- Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached
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-or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
300 Centennial Way Tustin CA 92780-3715
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(714) 573-3025 alumbard@tustinca.org

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

Date Signed 03/24/2020 08:09 AM Signature Electronic Submission
(month, day, year) (File the originally signed paper statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name

Austin Lumbard

▶ NAME OF BUSINESS ENTITY
The Walt Disney Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
Entertainment (television, theme parks, etc.)

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:
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 ACQUIRED DISPOSED

Comments: _____

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Filed Date: 05/27/2020 11:02 AM
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Puckett Charles E

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Tustin
Division, Board, Department, District, if applicable Your Position
City Council Member

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

Agency: SEE ATTACHED LIST Position:

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

State Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
 Multi-County County of
 City of Tustin Other

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

Annual: The period covered is January 1, 2019, through December 31, 2019.
-or- The period covered is _____, through December 31, 2019.
 Assuming Office: Date assumed _____
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 The period covered is January 1, 2019, through the date of leaving office.
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-or- **None - No reportable interests on any schedule**

5. Verification

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(Business or Agency Address Recommended - Public Document)
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STATEMENT OF ECONOMIC INTERESTS

COVER PAGE ATTACHMENT

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>Charles Puckett</u>

EXPANDED STATEMENT LIST

Agency Name	Division, Board, Department, District	Position or Title	Jurisdiction	Type of Statement	Period Covered
Southern CA Assn. of Governments		Regional Council Member	SEE BELOW	Annual	01/01/19 - 12/31/19

DESCRIPTION OF JURISDICTION

Agency: Southern CA Assn. of Governments
Jurisdiction Type: Multi-county
Description: Multi-county Imperial, Los Angeles, Orange, Riverside, San Bernardino, Ventura