

BK

STATEMENT OF ECONOMIC INTERESTS  
FAIR POLITICAL PRACTICES COMMISSION

Date Received  
Official Use Only

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Please type or print in ink.

12 MAR -7 AM 11:24

2012 FEB 29 10:49 AM  
Jon

NAME OF FILER (LAST) Reeve (FIRST) Derek

TP

1. Office, Agency, or Court  
CITY CLERK  
SAN JUAN CAPISTRANO

Agency Name  
City of San Juan Capistrano  
Division, Board, Department, District, if applicable  
Your Position  
City Council Member

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

Agency: Listed on Attached Separate Sheet Position:

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

- State
- Multi-County \_\_\_\_\_
- City of San Juan Capistrano
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2011, through December 31, 2011.
- or-
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2011.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- The period covered is January 1, 2011, through the date of leaving office.
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate: Election Year \_\_\_\_\_ 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 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 th

Date Signed 2/29/12  
(month, day, year)

Signature

**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  
Derek Reeve

**▶ 1. BUSINESS ENTITY OR TRUST**

Law Office of Derek Reeve

Name  
32158 Camino Capistrano #339, SJC 92675

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	IF APPLICABLE, LIST DATE:	
<input checked="" type="checkbox"/> \$0 - \$1,999	/    / 11	/    / 11
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

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)**

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

**▶ 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, if Investment, or Assessor's Parcel Number or Street Address of Real Property

\_\_\_\_\_

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

\_\_\_\_\_

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	/    / 11	/    / 11
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

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

**▶ 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	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$0 - \$1,999	/    / 11	/    / 11
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

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)**

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

**▶ 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, if Investment, or Assessor's Parcel Number or Street Address of Real Property

\_\_\_\_\_

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

\_\_\_\_\_

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	/    / 11	/    / 11
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

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: \_\_\_\_\_

STATEMENT OF ECONOMIC INTEREST  
FORM 700  
NAME: Derek Reeve

EXPANDED STATEMENT INCLUDES THE FOLLOWING AGENCIES & POSITIONS

<b>Agency</b>	<b>Position Title</b>	<b>Type of Statement</b>
Community Redevelopment Agency	Director	Leaving Office
San Juan Capistrano Public Finance Authority	Director	Annual
Sewer Maintenance District #1	Director	Annual
Orange County Transportation Authority (OCTA) GMA 9 & 11	Alternate Representative	Annual
San Juan Capistrano Housing Authority	Commissioner	Assuming Office



RECEIVED SCHEDULE D

Income & Gifts

2012 MAR 23 A 10:49

RECEIVED FAIR POLITICAL PRACTICES COMMISSION

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

NAME OF SOURCE: SAN JUAN CAPISTRANO CITY CLERK  
John and Marianne Taylor  
 ADDRESS (Business Address Acceptable):  
32400 Paseo Adelanto, San Juan Capistrano  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE:  
Public Office

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 50.00</u>	<u>Wedding Gift</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

NAME OF SOURCE: Sam and Vicky Allevato  
 ADDRESS (Business Address Acceptable):  
32400 Paseo Adelanto, San Juan Capistrano  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE:  
Public Office

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 30.00</u>	<u>Wedding Gift</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

NAME OF SOURCE: Michael and Karen Brust  
 ADDRESS (Business Address Acceptable):  
32400 Paseo Adelanto, San Juan Capistrano, CA  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE:  
Public Service

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 125.00</u>	<u>Wedding Gift</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

NAME OF SOURCE: Daisy Guy  
 ADDRESS (Business Address Acceptable):  
27112 B. Via Chiquero, San Juan Capistrano, CA  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 80.00</u>	<u>Wedding Gift</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

NAME OF SOURCE: Marc and Victoria Franz  
 ADDRESS (Business Address Acceptable):  
30011 Hillside Terrace, San Juan Capistrano, CA  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE:

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 90.00</u>	<u>Wedding Gift</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

**Filer's Verification**

Print Name: Derek Reeve, City Council Member

Office, Agency or Court: City of San Juan Capistrano

Statement Type:  2011/2012 Annual  Assuming  Leaving  
 Annual  Candidate

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

Date Signed: 03 / 23 / 2012  
month day year

Filer's Signature: (c)(1)

**SCHEDULE D**  
**Income – Gifts**

**AMENDMENT**

▶ NAME OF SOURCE  
Larry and Chris Kramer  
 ADDRESS (Business Address Acceptable)  
32400 Paseo Adelanto, San Juan Capistrano, CA  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Public Office

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 6.00</u>	<u>Wedding Gift</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Lennie DeCaro  
 ADDRESS (Business Address Acceptable)  
30987 Steeplechase, San Juan Capistrano, CA  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 50.00</u>	<u>Wedding Gift</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Roy and Ilse Byrnes  
 ADDRESS (Business Address Acceptable)  
P.O. Box 1029, San Juan Capistrano  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 50.00</u>	<u>Wedding Gift</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Ian and Deborah Smith  
 ADDRESS (Business Address Acceptable)  
28982 Via Hacienda, San Juan Capistrano, CA  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 30.00</u>	<u>Wedding Gift</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE  
Gary and Teri Stache  
 ADDRESS (Business Address Acceptable)  
30012 Hillside Terrace, San Juan Capistrano, CA  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	<u>\$ 100.00</u>	<u>Wedding Gift</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

**Filer's Verification**

Print Name Derek Reeve, City Council Member

Office, Agency or Court City of San Juan Capistrano

Statement Type  2011/2012 Annual  Assuming  Leaving  
 Annual  Candidate  
(yr)

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

Date Signed 03/23/2012  
(month, day, year)

Filer's Signature (c)(1)

**SCHEDULE D**  
**Income – Gifts**

▶ NAME OF SOURCE  
Cathleen Brannon  
ADDRESS (Business Address Acceptable)  
28141 Via Rueda, San Juan Capistrano, CA  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	\$ <u>50.00</u>	<u>Wedding Gift</u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>

▶ NAME OF SOURCE  
Tony and Orrie Brown  
ADDRESS (Business Address Acceptable)  
31481 La Matanza, San Juan Capistrano, CA  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	\$ <u>75.00</u>	<u>Wedding Gift</u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>

▶ NAME OF SOURCE  
John and Harriet Perry  
ADDRESS (Business Address Acceptable)  
32175 Via Barrida, San Juan Capistrano, CA  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	\$ <u>50.00</u>	<u>Wedding Gift</u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>

▶ NAME OF SOURCE  
Mike and Kim McCarthy  
ADDRESS (Business Address Acceptable)  
27592 Silver Creek Dr., San Juan Capistrano, CA  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	\$ <u>1500.00</u>	<u>Use of Property for Wedding</u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>

▶ NAME OF SOURCE  
Jim and Helen Reardon  
ADDRESS (Business Address Acceptable)  
28261 Via Rueda, San Juan Capistrano, CA  
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 30 / 11</u>	\$ <u>30.00</u>	<u>                  </u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>
<u>   /   /   </u>	\$ <u>          </u>	<u>                  </u>

**Filer's Verification**

Print Name Derek Reeve, City Council Member

Office, Agency or Court City of San Juan Capistrano

Statement Type  2011/2012 Annual  Assuming  Leaving  
     Annual  Candidate  
(yr)

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

Date Signed 05/23/2012  
(month, day, year)

Filer's Signature (c)(1)