# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

#### STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

#### **COVER PAGE**

Please type or print in ink.

#### A PUBLIC DOCUMENT

| NAME OF FILER (LAST)   | (FIRST)                         |   | (MIDDLE)                                    |
|--|---------------------------------|---|---|
| Talleda  | Mike ( Miguel )                 | Lu  | uis   |
| 1. Office, Agency, or Court  |                                 |   |   |
| Agency Name (Do not use acronyms)  |                                 |   |   |
| Hawthorne City Council   |                                 |   |   |
| Division, Board, Department, District, if applica  | ble                             | Your Position   | 11100                                       |
| City of Hawthorne  |                                 | Council member  | <b>2</b> 夏艾素語 200                           |
| ► If filing for multiple positions, list below or o  | on an attachment. (Do not use a | acronyms)   | 和了第   |
| Agency:  |                                 | Position:   |   |
| 2. Jurisdiction of Office (Check at leas   | t one box)                      |   | £2.1  |
| State  | ·                               | Judge, Retired Judge, Pro<br>(Statewide Jurisdiction) | Tem Judge, or Court Commissioner            |
| Multi-County   |                                 | X County of Los Angeles                               | S   |
| ⊠ City of .Hawthorne   |                                 | Other   |   |
| 3. Type of Statement (Check at least or  | ne box)                         |   |   |
| Annual: The period covered is January 1 December 31, 2019.   | ,                               | -   | ft/<br>eck one circle.)                     |
| The period covered is/_<br>December 31, 2019.  | , through                       | O The period covered is leaving office.               | January 1, 2019, through the date of        |
| Assuming Office: Date assumed  | J                               |   | , through                                   |
| Candidate: Date of Election  | and office sought, if           | different than Part 1:                                |   |
| 4. Schedule Summary (must compl  | ete) > Total number o           | f pages including this cov                            | /of honor                                   |
| Schedules attached   | oto, Proturnamon o              | r pagos moiaumg ans our                               | or page.                                    |
| Schedule A-1 - Investments – schedule  | e attached 🔀 🤄                  | Schedule C - Income, Loans, & E                       | Business Positions - schedule attached      |
| ⊠ Schedule A-2 - Investments - schedule  |                                 | Schedule D - Income – Gifts – sc                      |   |
| 🗵 Schedule B - Real Property schedule  | e attached 5                    | Schedule E • Income – Gifts – Tr                      | avel Payments schedule attached             |
| -or-  None - No reportable interests   | on any schedule                 |   | AR C  |
| 5. Verification  |                                 |   |   |
| MAILING ADDRESS STREET<br>(Business or Agency Address Recommended - Public Docu                    | CITY                            | STATE   | ZEP COBE III                                |
| 14147 Hawthorne BIVD   | Hawthorne                       | CA  | ラス CD 90250 T                               |
| DAYTIME TELEPHONE NUMBER   |                                 | MAIL ADDRESS  |   |
| ( 310- )676-7746   | ļn                              | ntalleda@aol.com                                      |   |
| I have used all reasonable diligence in preparin<br>herein and in any attached schedules is true a |                                 |   | f my knowledge the information contained    |
| I certify under penalty of perjury under the   | laws of the State of California | that the foregoing is true and                        | correct.                                    |
| Date Signed 3/17/2020  | ot                              | Markey 1////////////////////////////////////          | 1 the                                       |
| Date Signed(month, day, year)  | Sigr                            | nature(Pile the originally signed                     | paper stalement with your filing official.) |

#### **SCHEDULE A-1** Investments

# Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name  |
| Mike Talleda  |

|   | Do not attach prokerage t                            | or imanual statements,  |
|---|--|---|
| ► NAME OF BUSINESS                                  |  | ► NAME OF BUSINESS ENTITY   |
| ShorelineWest R                                     |  |   |
| GENERAL DESCRIPTI                                   | ION OF THIS BUSINESS                                 | GENERAL DESCRIPTION OF THIS BUSINESS  |
| CAID NADIVET WALLE                                  |  | PAID MADIVE WALLE   |
| FAIR MARKET VALUE                                   | \$10,001 - \$100,000                                 | FAIR MARKET VALUE \$10,001 - \$100,000                                      |
| (X) \$2,000 - \$10,000<br>(1) \$100,001 - \$1,000,0 |  | \$100,001 - \$1,000,000 Over \$1,000,000                                    |
| \$100 001 - \$1,000;0                               |  |   |
| NATURE OF INVESTM                                   | MENT Real Estate Sales                               | NATURE OF INVESTMENT Stock Other  |
| ☐ Partnership ○ Inco                                | (Describe)<br>me Received of \$0 - \$499             | (Describe)  Partnership () Income Received of \$0 - \$499                   |
|   | ome Received of \$500 or More (Report on Schedule C) | Income Received of \$500 or More (Report on Schedule C)                     |
| IF APPLICABLE, LIST                                 | DATE:  | IF APPLICABLE, LIST DATE:   |
| <u> </u>  | <u>//19</u>  |   |
| ACQUIRED  | DISPOSED   | ACQUIRED DISPOSED   |
| ► NAME OF BUSINESS                                  | ENTITY   | ► NAME OF BUSINESS ENTITY   |
| GENERAL DESCRIPTI                                   | ON OF THIS BUSINESS                                  | GENERAL DESCRIPTION OF THIS BUSINESS  |
|   |  |   |
| FAIR MARKET VALUE                                   |  | FAIR MARKET VALUE   |
| \$2,000 - \$10,000                                  | \$10,001 ~ \$100,000 .  Over \$1,000,000             | \$100,001 - \$100,000 \$100,000<br>\$100,001 - \$1,000,000 Over \$1,000,000 |
| S100,001 - \$1,000,00                               | 00   | 5100,001 - \$1,000,000 Over \$1,000,000                                     |
| NATURE OF INVESTM                                   | ner  | NATURE OF INVESTMENT Stock Other  |
| Dartnerebla Olinco                                  | (Describe)<br>me Received of \$0 - \$499             | (Describe) Partnership () Income Received of \$0 - \$499                    |
|   | me Received of \$500 or More (Report on Schedule C)  | Income Received of \$500 or More (Report on Schedule C)                     |
| IF APPLICABLE, LIST                                 | DATE:  | IF APPLICABLE, LIST DATE:   |
| // 19_  | //_19  | /////   |
| ACQUIRED  | DISPOSED   | ACQUIRED DISPOSED   |
| ► NAME OF BUSINESS                                  | ENTITY   | ► NAME OF BUSINESS ENTITY   |
| GENERAL DESCRIPTI                                   | ON OF THIS BUSINESS                                  | GENERAL DESCRIPTION OF THIS BUSINESS  |
|   |  | ·   |
| FAIR MARKET VALUE                                   | -  | FAIR MARKET VALUE   |
| \$2,000 - \$10,000                                  | \$10,001 - \$100,000                                 | \$2,000 - \$10,000 \$10,001 - \$100,000                                     |
| \$100,001 - \$1,000,00                              | 00 Over \$1,000,000                                  | \$100,001 - \$1,000,000 Over \$1,000,000                                    |
| NATURE OF INVESTM                                   | ENT  | NATURE OF INVESTMENT  |
| Stock Oth   | er   | Stock Other   |
| Parinership O inco                                  | (Describe)<br>me Received of \$0 - \$499             | (Describe)  Partnership O Income Received of \$0 - \$499                    |
|   | me Received of \$500 or More (Report on Schedule C)  | O Income Received of \$500 or More (Report on Schedule C)                   |
| IF APPLICABLE, LIST                                 | DATE:  | IF APPLICABLE, LIST DATE:   |
| <u></u>   |  |   |
| ACQUIRED  | DISPOSED   | ACQUIRED DISPOSED   |
|   | ,  |   |
| Comments:   |  |   |

#### SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

|      |          |         |        | AYA     |
|------|----------|---------|--------|---------|
| CAL  |          | IA FOF  |        |         |
| FAIR | OLITICAL | PRACTIC | ES COM | NOISSIN |
| Nam  | Θ .      |         |        |         |
| Mi   | Ke Ka    | illeda  |        |         |
|      |          |         |        |         |

| ► 1. BUSINESS ENTITY OR TRUST   | ► 1. Business entity or trust  |
|---|--|
| ShorelineWest Realty  |  |
| Name<br>14147 Hawthorne Bl Hawthorne CA 90250   | Name   |
| Address (Business Address Acceptable)   | Address (Business Address Acceptable)  |
| Check one   | Check one  |
| ☐ Trust, go to 2 图 Business Entity, complete the box, then go to 2  | ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2   |
| GENERAL DESCRIPTION OF THIS BUSINESS  | GENERAL DESCRIPTION OF THIS BUSINESS   |
| FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   | FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999 \$2,000 - \$10,000  |
| L   |  |
| ▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA<br>SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)  | ▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA<br>SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)  |
| \$0 - \$499       X \$10,001 - \$100,000         \$500 - \$1,000       OVER \$100,000         \$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) | \$0 - \$499  |
| None or   | None or Names listed below   |
| generated a totally different proceed.  |  |
|   |  |
| ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:  □ INVESTMENT □ REAL PROPERTY  | ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:  INVESTMENT REAL PROPERTY  |
| Name of Business Enlity, If Investment, <u>or</u><br>Assessor's Parcel Number or Street Address of Real Property  | Name of Business Entity, If Investment, <u>or</u><br>Assessor's Parcel Number or Street Address of Real Property   |
| Description of Business Activity <u>or</u><br>City or Other Precise Location of Real Property   | Description of Business Activity <u>or</u><br>City or Other Precise Location of Real Property  |
| FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000  | FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   10,000 |
| NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership   | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership  |
| Leasehold Other   | Leasehold Yrs, remaining Other   |
| Check box if additional schedules reporting investments or real property are attached   | Check box if additional schedules reporting investments or real property are attached  |

Comments:\_\_\_

## **SCHEDULE B** Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION Name Mille Talledg

| - ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS   | ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS   |
|--|--|
| 4207 W 141st   | 3147- 49 133rd   |
| CITY   | CITY   |
| Hawthorne CA 90250   | Hawthorne, Ca 90250  |
| FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   / 19  | 9 FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:    \$2,000 - \$10,000  |
| NATURE OF INTEREST   | NATURE OF INTEREST   |
|  | Ownership/Deed of Trust Easement   |
| Leasehold  | Leasehold Other  |
| IF RENTAL PROPERTY, GROSS INCOME RECEIVED  | IF RENTAL PROPERTY, GROSS INCOME RECEIVED  |
| \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000   | \$0 - \$499 \$600 - \$1,000 \$1,001 - \$10,000   |
| X \$10,001 - \$100,000 OVER \$100,000  | ■ \$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 income of \$10,000 or more.   |  |
| □ None Gilberto Gomez Odalys Govea   | Javier Cruz Mary Dunn  |
| Gilberto Gomez Odalys Govea  * You are not required to report loans from a comme business on terms available to members of the pulloans received not in a lender's regular course of the pulloans received not | Javier Cruz  Mary Dunn  ercial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and business must be disclosed as follows:   |
| Gilberto Gomez Odalys Govea  * You are not required to report loans from a comme business on terms available to members of the pu  | Javier Cruz  Mary Dunn  ercial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and  |
| Gilberto Gomez Odalys Govea  * You are not required to report loans from a comme business on terms available to members of the pulloans received not in a lender's regular course of the pulloans received not | Javier Cruz  Mary Dunn  ercial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and business must be disclosed as follows:   |
| * You are not required to report loans from a comme business on terms available to members of the pu loans received not in a lender's regular course of the NAME OF LENDER*  | Javier Cruz Mary Dunn  ercial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and business must be disclosed as follows:  NAME OF LENDER*   |
| * You are not required to report loans from a comme business on terms available to members of the pu loans received not in a lender's regular course of the NAME OF LENDER*  ADDRESS (Business Address Acceptable)   | Javier Cruz  Mary Dunn  ercial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)   |
| * You are not required to report loans from a comme business on terms available to members of the puloans received not in a lender's regular course of the NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  | Javier Cruz  Mary Dunn  ercial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER   |
| * You are not required to report loans from a comme business on terms available to members of the pu loans received not in a lender's regular course of the NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)   | Javier Cruz  Mary Dunn  Percial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)      |
| * You are not required to report loans from a comme business on terms available to members of the pu loans received not in a lender's regular course of the NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  None  | Javier Cruz  Mary Dunn  Proial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  None |
| Gilberto Gomez Odalys Govea  * You are not required to report loans from a comme business on terms available to members of the puloans received not in a lender's regular course of the NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)  | Javier Cruz  Mary Dunn  Percial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)       |
| * You are not required to report loans from a comme business on terms available to members of the pu loans received not in a lender's regular course of the NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000   | Javier Cruz  Mary Dunn  Percial lending institution made in the lender's regular course of blic without regard to your official status. Personal loans and business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)       |

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

|               | naug koskia    | 700       |
|---------------|----------------|-----------|
| CALIFORI      |                | 7(UU)     |
| FAIR POLITICA | AL PRACTICES C | NOISSIMMO |
| Name          |                |           |
| Mike-         | Talleda.       |           |

| ➤ 1. INCOME RECEIVED  | ▶ 1. INCOME RECEIVED   |
|---|--|
| NAME OF SOURCE OF INCOME  | NAME OF SOURCE OF INCOME   |
| Wounded Heroes of America   | ShorelineWest Inc.   |
| ADDRESS (Business Address Acceptable)                                       | ADDRESS (Business Address Acceptable)  |
| 14147 Hawthorne BLVD, Hawthorne CA 90250                                    | 14147 Hawthorne Blvd   |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE  | BUSINESS ACTIVITY, IF ANY, OF SOURCE   |
| non-profit assiting post 9/11 Wounded Veterans                              | Real Estate sales  |
| YOUR BUSINESS POSITION  | YOUR BUSINESS POSITION   |
| President   | President  |
| GROSS INCOME RECEIVED No Income - Business Position Only                    | GROSS INCOME RECEIVED No income - Business Position Only   |
| \$500 - \$1,000 \$1,001 - \$10,000  | \$500 - \$1,000\$1,001 - \$10,000  |
| X \$10,001 - \$100,000 ☐ OVER \$100,000                                     |  |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED                                 | 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.) | Partnership (Less than 10% ownership, For 10% or greater use Schedule A-2.)  |
| Sale of   | Sale of  |
| (Real property, car, boal, etc.)  | (Real property, car, boal, etc.)   |
| Commission or Rental Income, list each source of \$10,000 or more           | Commission or Rental Income, list each source of \$10,000 or more  |
| Collegiassion of California, as each source of project of more              | Contains and of the treatment in the same of strate of the same of |
| (Describe)  | (Describe)   |
| Other(Describe)   | Other(Describe)  |
| ▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING                     | PERIOD   |
| a retail installment or credit card transaction, made in t                  | lending institution, or any indebtedness created as part of<br>he lender's regular course of business on terms available to<br>atus. Personal loans and loans received not in a lender's<br>s:   |
| NAME OF LENDER*   | !NTEREST RATE TERM (Months/Years)  |
|   | % None   |
| ADDRESS (Business Address Acceptable)                                       | SECURITY FOR LOAN  |
| PURINTED ACTIVITY IT ANY OF LEMPER  | None Personal residence  |
| BUSINESS ACTIVITY, IF ANY, OF LENDER  | hand the band the ban |
|   |  |
|   | Real PropertyStreet address  |
| HIGHEST BALANCE DURING REPORTING PERIOD '                                   | Real PropertyStreet address  |
| HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000                    | Real Property   Street address   City  |
|   | Street address  City   |
| \$500 - \$1,000 .   | Street address   |
| \$500 - \$1,000<br>\$1,001 - \$10,000                                       | Street address  City   |
| \$500 - \$1,000<br>\$1,001 - \$10,000<br>\$10,001 - \$100,000               | Street address  City  Other  |