

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Initial Filing Received
 Received
 CITY OF GARDEN GROVE
 CITY CLERK'S OFFICE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
KAUZLER ANDREW M 2015 FEB 26 A 9:01

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
CITY OF GARDEN GROVE, COMMISSIONER - PLANNING
 Division, Board, Department, District, if applicable Your Position
PLANNING

► 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 GARDEN GROVE
- 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, 2014, through December 31, 2014.
- or-
- The period covered is _____ through December 31, 2014.
- Assuming Office:** Date assumed 2/19/2015
- Leaving Office:** Date Left _____ (Check one)
- The period covered is January 1, 2014, through the date of leaving office.
- The period covered is _____ through the date of leaving office.
- Candidate:** Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

- Check applicable schedules or "None." ► 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
- or-
- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
 (Business or Agency Address Recommended - Public Document)
13011 NINA PL. GARDEN GROVE CA 92843

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(714) 595-5494 ANDREWKAUZLER@OUTLOOK.COM

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 2/26/15 Signature [Signature]
 (month, day, year) (File the originally signed statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Initial Filing
RECEIVED Received
CITY OF GARDEN GROVE
CITY CLERK'S OFFICE
2015 MAR 26 10:24

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Mai Vu 2015 MAR 26 10:24

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Garden Grove
Division, Board, Department, District, if applicable
Planning Commission
Your Position
Commissioner

► 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 Garden Grove
- 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, 2014, through December 31, 2014.
-or- The period covered is _____ through December 31, 2014.
- Assuming Office: Date assumed 03 / 19 / 2015
- Leaving Office: Date Left _____ (Check one)
 - The period covered is January 1, 2014, through the date of leaving office.
 - The period covered is _____ through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

- Check applicable schedules or "None." ► Total number of pages including this cover page: 04
- 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
City Clerk's Office P.O. Box 3070 Garden Grove CA 92842
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(714) 741-5035 kathyb@ci.garden-grove.ca.us

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 03/26/2015 Signature _____
(month, day, year) (File the originally signed statement with your filing official.)

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
Mai, Vu

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
13894 Dawson Street

CITY
Garden Grove CA 92843

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

IF APPLICABLE, LIST DATE:
 ACQUIRED / /14 DISPOSED / /14

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.
 None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

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:
 ACQUIRED / /14 DISPOSED / /14

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.
 None

* 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*
PMAC

ADDRESS (Business Address Acceptable)
15325 FAIRFIELD RANCH RD. SUITE 200
CHINO HILLS CA 91709

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE
4 % None

TERM (Months/Years)
60/5

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*
Seneca

ADDRESS (Business Address Acceptable)
611 JAMISON ROAD
ELMA NY 14059

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE
4 % None

TERM (Months/Years)
360/30

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

Guarantor, if applicable

Comments: _____

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing

Received
Official Use Only

COVER PAGE

RECEIVED
CITY OF GARDEN GROVE
CITY CLERK'S OFFICE
2015 MAR 30

Please type or print in ink.

NAME OF FILER (LAST) MARGOLIN (FIRST) Constance Connie
ADDRESS 2045 MAR 30 A KAYE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Garden Grove

Division, Board, Department, District, if applicable

Planning Commission

Your Position

Commissioner

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, 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, 2014, through December 31, 2014.
Assuming Office: Date assumed
Candidate: Election year
Leaving Office: Date Left
The period covered is January 1, 2014, through the date of leaving office.

4. Schedule Summary

- 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

DAYTIME TELEPHONE NUMBER E-MAIL 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 3-30-2015 Signature [Handwritten Signature]

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

RECEIVED
CITY OF GARDEN GROVE
CITY CLERK'S OFFICE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) 2015 FEB 19 5:07 R.
O'Neill John

1. Office, Agency, or Court

Agency Name
City Of Garden Grove
Division, Board, Department, District, if applicable
Planning Commission
Your Position
Commissioner

► 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 Garden Grove
- 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 02 / 19 / 2015
- 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: 1

- 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
P.O. Box 627 Garden Grove CA 92842
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)
(714) 319-2771 john@JohnONeillForGardenGrove.com

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 2/19/2015 (month, day, year) Signature [Handwritten Signature] (File the originally signed statement with your filing official.)

**STATEMENT OF ECONOMIC INTERESTS
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 CITY OF GARDEN GROVE
 CITY CLERK'S OFFICE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) 2015 MAR -5 A 9: 26
 Paredes Mark Anthony Reynoso

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
 City of Garden Grove
 Division, Board, Department, District, if applicable
 Planning Commission
 Your Position
 Commissioner

► 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 or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of Garden Grove Other _____

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

- Annual:** The period covered is January 1, 2014, through December 31, 2014.
- Leaving Office:** Date Left ____/____/____
(Check one)
- Assuming Office:** Date assumed 02 / 19 / 2015
- Candidate:** Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

- Check applicable schedules or "None." ► Total number of pages including this cover page: 1
- 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
 (Business or Agency Address Recommended - Public Document)
 10339 Dove Court Garden Grove CA 92840
 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
 (213) 820-5741 marparedes@gmail.com

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 03/05/2015
 (month, day, year)

Signature MAP
 (File the originally signed statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing
Received
Official Use Only

COVER PAGE

RECEIVED
CITY OF GARDEN GROVE
CITY CLERK'S OFFICE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Zamora Linda R. 2015 FEB 25 A 8: 58

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Garden Grove

Division, Board, Department, District, if applicable

Planning Commission

Your Position

Commissioner

► 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 Garden Grove
- 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, 2014, through December 31, 2014.
-or- The period covered is 01 / 01 / 2016, through December 31, 2014.
- Assuming Office: Date assumed _____
- Candidate: Election year _____ and office sought, if different than Part 1: _____
- Leaving Office: Date Left ____/____/_____
(Check one)
 - The period covered is January 1, 2014, 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: 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
11222 Acacia Parkway Garden Grove CA 92840
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(714) 741-5000 lindazamora132@yahoo.com

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 02/24/2015
(month, day, year)

Signature _____
(File the originally signed statement with your filing official.)

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

Name
Linda R. Zamora

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Iberican Language Services, Inc.

ADDRESS (Business Address Acceptable)
13274 Taft Street, Garden Grove, CA 92843

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Interpreting and Translation Services

YOUR BUSINESS POSITION
President/CEO

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
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)

Sale of _____
(Real property, car, boat, etc.)

Loan repayment

Commission or Rental Income, list each source of \$10,000 or more

(Describe)

Other _____
(Describe)

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

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
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)

Sale of _____
(Real property, car, boat, etc.)

Loan repayment

Commission or Rental Income, list each source of \$10,000 or more

(Describe)

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 TERM (Months/Years)
_____ % None _____

SECURITY FOR LOAN
 None Personal residence

Real Property _____
Street address
_____ City

Guarantor _____

Other _____
(Describe)

Comments: _____