

STATEMENT OF ECONOMIC INTERESES ARDEN GROVEReceived COVER PAGE RECEIVED Date Initial Filing RECEIVED CARROLL STATEMENT OF ECONOMIC INTERESES ARDEN GROVEReceived CITY CLERK'S OFFICE OF THE CONOMIC INTEREST OF THE CONOMIC I

COVER PAGE

Please type or print in ink.		
NAME	OF FILER (LAST)	(FIRST) (MIDDLE)
0'/	Neill John	R
1. C	Office, Agency, or Court	
Ā	Agency Name (Do not use acronyms)	2
1	City of Garden Grove	
Ī	Division, Board, Department, District, if applicable	Your Position
	District 2	Council Member
,	► If filing for multiple positions, list below or on an attachment. (Do not us	e acronyms)
,	Agency:	Position:
2. 、	Jurisdiction of Office (Check at least one box)	
	State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Г	Multi-County	County of
	Zity of Garden Grove	Other
13	V City OI	Oute
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)
	-or- The period covered is/, through December 31, 2014.	 The period covered is January 1, 2014, through the date of leaving office.
<u>.</u>	Assuming Office: Date assumed 12 , 13 , 2015	The period covered is/ through the date of leaving office.
E	Candidate: Election year and office sought, if	different than Part 1:
4. 5	Schedule Summary	
	•	number of pages including this cover page:
Г	Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached
Ī	Schedule A-2 - Investments – schedule attached	Schedule D - Income - Giffs - 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. V	/erification	
	MAILING ADDRESS STREET CITY Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
	11222 Acacia Parkway Garden Gro	ove CA 92840
7	DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS .
(714) 741-5000	joneill@ci.garden-grove.ca.us
	have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained erein and in any attached schedules is true and complete. I acknowledge this is a public document.	
- 1	rtify under penalty of perjury under the laws of the State of California that the foregoing is true and correct	
· D		ignature /// Ob
	(month, day, year)	The the originally signed statement with your filing official.)

FPPC Form 700 (2014/2015)
FPPC Advice Email: advice@fppc.ca.gov

FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov