STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER (LAST) JOHNSON (FIRST) NATREHA (MIDDLE)

1. Office, Agency, or Court
   Agency Name (Do not use acronyms) City of Lake Elsinore
   Division, Board, Department, District, if applicable City Council member
   Your Position
   ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
   Agency: City of Lake Elsinore Position: City Council Member

2. Jurisdiction of Office (Check at least one box)
   ○ State
   ○ Multi-County
   ○ City of Lake Elsinore

3. Type of Statement (Check at least one box)
   □ Annual: The period covered is January 1, 2015, through December 31, 2015.
   □ Leaving Office: Date Left ___/___/____
   ○ The period covered is January 1, 2015, through the date of leaving office.
   ○ The period covered is ___/___/____, through the date of leaving office.
   □ Asssuming Office: Date assumed ___/___/____
   □ Candidate: Election year ___ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: 4
   Schedules attached
   ○ 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 136 South Main St
   (Business or Agency Address Recommended - Public Document) Lake Elsinore
   CITY CA 92530
   STREET
   ZIP CODE
   DAYTIME TELEPHONE NUMBER (951) 674-3124 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 3/30/2014
   Signature [Redacted]

PPCC Form 700 (2015/2016)
PPCC Advice Email: advice@ppcc.ca.gov
PPCC Toll-Free Helpline: 866/275-3772 www.ppcc.ca.gov
SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

Name: Natasha Johnson

1. BUSINESS ENTITY OR TRUST

<table>
<thead>
<tr>
<th>Name</th>
<th>15835 NW Beacon Square Blvd, Boise, Idaho 83712</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Business Address Acceptable</td>
</tr>
<tr>
<td>Trust, go to 2</td>
<td>Business Entity, complete the box, then go to 2</td>
</tr>
<tr>
<td>☑</td>
<td></td>
</tr>
</tbody>
</table>

GENERAL DESCRIPTION OF BUSINESS

Service - Carpet, Tile, Upholstery Cleaning

FAIR MARKET VALUE

- $0 - $1,999
- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- $1,000,001 - $10,000,000
- Over $10,000,000

If Applicable, List Date:

- 15
- 15

ACQUIRED

DISPOSED

NATURE OF INVESTMENT

- Partnership
- Sole Proprietorship
- Other

YOUR BUSINESS POSITION:

CO-OWNER

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- $0 - $499
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- Over $100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (ATTACH A SEPARATE SHEET IF NEEDED)

None or

Names listed below

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 Entity, Invested in, 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

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

If Applicable, List Date:

- 15
- 15

ACQUIRED

DISPOSED

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:

FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

NAME OF SOURCE OF INCOME

NATASHA JOHNSON

ADDRESS (Business Address Acceptable)

15280 Regatta Way Lake Elsinore

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Carpet Tile & Upholstery Cleaning

YOUR BUSINESS POSITION

Business Partner/Co-owner

1. INCOME RECEIVED

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
☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
☐ Sale of
☐ Loan repayment
☐ Commission or Rental Income, list each source of $10,000 or more
☐ 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

☐ %
☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None
☐ Personal residence

☐ Real Property
☐ Guarantor
☐ Other

Street address

City

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

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

JAVITA

ADDRESS (Business Address Acceptable)

7835 Northwest Pavon Square Blvd. Brea, Calif.

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Functional Beverage Company

YOUR BUSINESS POSITION

Owner / Distribution

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

☐ Other (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

☐ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property Street address

☐ Guarantor City

☐ Other (Describe) (Describe)