CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (MIDDLE) (FIRST)
Castro Edwin

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
City of Lake Elsinore
Division, Board, Department, District, if applicable
City Council
Your Position
Candidate

► 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
[ ] Judge or Court Commissioner (Statewide Jurisdiction)
[ ] County of
[ ] Other
[ ] 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 / / 
(Check one)
- or -
The period covered is / / , through December 31, 2015.
[ ] The period covered is / / , through the date of leaving office.
[ ] Assuming Office: Date assumed / / 
[ ] Other
[ ] Candidate: Election year 2016 and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 2
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 STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1150 East Vista Way Vista CA 92084
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(562) 449-5039 edwin.castro@wellsfargo.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 07/26/2016 (month, day, year) Signature

(Ill the originally signed statement with your filing official)

FPPC Form 700 (2015/2016)
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)

### 1. INCOME RECEIVED

<table>
<thead>
<tr>
<th>NAME OF SOURCE OF INCOME</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Wells Fargo Bank N.A.</td>
<td></td>
</tr>
</tbody>
</table>

**ADDRESS (Business Address Acceptable)**  
1150 East Vista Way  

**BUSINESS ACTIVITY, IF ANY, OF SOURCE**  
Community Retail Banking  

**YOUR BUSINESS POSITION**  
Banker  

**GROSS INCOME RECEIVED**

- $500 - $1,000
- $1,001 - $10,000
done
- $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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
<th></th>
</tr>
</thead>
</table>

**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  
  City
- Guarantor  
  (Describe)
- Other  
  (Describe)

**Comments:**

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FPPC Form 700 (2015/2016) Sch. C  
FPPC Advice Email: advice@fppc.ca.gov  
FPPC Toll-Free Helpline: 866/275-3772  www.fppc.ca.gov