STATEMENT OF ECONOMIC INTERESTS

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   City of Lake Elsinore
   Division, Board, Department, District, if applicable
   Your Position
   City Council Member
   ► 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 ____________________________
   X City of _Lake Elsinore_ ____________________________
   □ County of ____________________________
   □ Other ____________________________

3. Type of Statement (Check at least one box)
   X Annual: The period covered is January 1, 2017, through December 31, 2017.
   -or-
   The period covered is ______/_____/_______, through December 31, 2017.
   □ Leaving Office: Date Left _____/_____/_______
   (Check one)
   O The period covered is January 1, 2017, through the date of leaving office.
   -or-
   O The period covered is ______/_____/_______, through the date of leaving office.
   □ Assuming Office: Date assumed ______/_____/_______
   □ Candidate: Date of Election ______/_____/_______ and office sought, if different than Part 1: ______/_____/_______

4. Schedule Summary (must complete)
   ► Total number of pages including this cover page: 4
   Schedules attached
   X Schedule A-1 - Investments – schedule attached
   X Schedule A-2 - Investments – schedule attached
   -or-
   X Schedule C - Income, Loans, & Business Positions – schedule attached
   □ Schedule D - Income – Gifts – schedule attached
   □ Schedule B - Real Property – 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)
   19 Corte Madera
   Lake Elsinore
   CA
   92532-0200
   DAYTIME TELEPHONE NUMBER
   (951) 245-7729
   E-MAIL ADDRESS
dhickman@lake-elsinore.org
   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 03/26/2018 10:55 AM Signature ____________________________
   (File the originally signed statement with your filing official.)
**SCHEDULE A-1**

**Investments**

**Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

*Do not attach brokerage or financial statements.*

---

### NAME OF BUSINESS ENTITY

**Black River Properties**

**GENERAL DESCRIPTION OF THIS BUSINESS**

land and mineral rights

**FAIR MARKET VALUE**

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

**NATURE OF INVESTMENT**

- Stock
- Other

Income Received of $0 - $499
Income Received of $500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

- 17
- 17

**ACQUIRED**

**DISPOSED**

---

### NAME OF BUSINESS ENTITY

**Morgan Stanley Dean Witter**

**GENERAL DESCRIPTION OF THIS BUSINESS**

Broker

**FAIR MARKET VALUE**

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

**NATURE OF INVESTMENT**

- Stock
- Other

Income Received of $0 - $499
Income Received of $500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

- 17
- 17

**ACQUIRED**

**DISPOSED**

---

**Comments:**

---

**CALIFORNIA FORM 700**


FPPC Advice Email: advice@fppc.ca.gov

FPPC Toll-Free Helpline: 866/275-3772  www.fppc.ca.gov
### SCHEDULE A-2

**Investments, Income, and Assets of Business Entities/Trusts**

*(Ownership Interest is 10% or Greater)*

### 1. BUSINESS ENTITY OR TRUST

**Name:** Daryl Hickman

<table>
<thead>
<tr>
<th>Name</th>
<th>Address (Business Address Acceptable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daryl and Amy Hickman Trust</td>
<td>19 Corte Madera, Lake Elsinore, CA 92532</td>
</tr>
</tbody>
</table>

**Check one:**
- [x] Trust, go to 2
- [ ] Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

- **FAIR MARKET VALUE**: $1,001 - $10,000
- **IF APPLICABLE, LIST DATE**: 1/1/17
- **ACQUIRED**
- **DISPOSED**

**NATURE OF INVESTMENT**
- [ ] Partnership
- [ ] Sole Proprietorship
- [ ] Other

**YOUR BUSINESS POSITION**

---

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

- [ ] $0 - $499
- [x] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000

**Comments:**

---

### 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary)

- [x] None
- [ ] Names listed below

**Comments:**

---

### 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

**Check one box:**
- [x] INVESTMENT
- [ ] REAL PROPERTY

<table>
<thead>
<tr>
<th>Trust Company Of America</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Business Entity, if Investment, or Assessor’s Parcel Number or Street Address of Real Property</td>
</tr>
<tr>
<td>Englewood, CO 80155</td>
</tr>
</tbody>
</table>

**Description of Business Activity or City or Other Precise Location of Real Property**

- **FAIR MARKET VALUE**: $100,001 - $1,000,000
- **IF APPLICABLE, LIST DATE**: 1/1/17
- **ACQUIRED**
- **DISPOSED**

**NATURE OF INTEREST**
- [ ] Property Ownership/Deed of Trust
- [ ] Stock
- [x] Partnership

**LEASEHOLD**

- [ ] Years remaining
- [ ] Other

**Comments:**

---

### 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

**Check one box:**
- [x] INVESTMENT
- [ ] REAL PROPERTY

<table>
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<tr>
<td>Englewood, CO 80155</td>
</tr>
</tbody>
</table>

**Description of Business Activity or City or Other Precise Location of Real Property**

- **FAIR MARKET VALUE**: $100,001 - $1,000,000
- **IF APPLICABLE, LIST DATE**: 1/1/17
- **ACQUIRED**
- **DISPOSED**

**NATURE OF INTEREST**
- [ ] Property Ownership/Deed of Trust
- [ ] Stock
- [x] Partnership

**LEASEHOLD**

- [ ] Years remaining
- [ ] Other

**Comments:**

---

**Name:**

**Address (Business Address Acceptable):**

**Check one:**
- [x] Trust, go to 2
- [ ] Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

- **FAIR MARKET VALUE**: $1,001 - $10,000
- **IF APPLICABLE, LIST DATE**: 1/1/17
- **ACQUIRED**
- **DISPOSED**

**NATURE OF INVESTMENT**
- [ ] Partnership
- [ ] Sole Proprietorship
- [ ] Other

**YOUR BUSINESS POSITION**

---

**Comments:**
### Schedule C
**Income, Loans, & Business Positions**
*(Other than Gifts and Travel Payments)*

<table>
<thead>
<tr>
<th>1. INCOME RECEIVED</th>
<th>1. INCOME RECEIVED</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NAME OF SOURCE OF INCOME</strong></td>
<td><strong>NAME OF SOURCE OF INCOME</strong></td>
</tr>
<tr>
<td>Lake Elsinore Unified School District</td>
<td>Riverside Transit Agency</td>
</tr>
<tr>
<td>ADDRESS <em>(Business Address Acceptable)</em></td>
<td>ADDRESS <em>(Business Address Acceptable)</em></td>
</tr>
<tr>
<td>545 Chaney St. Lake Elsinore, 92530</td>
<td>1825 3rd St. Riverside CA</td>
</tr>
</tbody>
</table>

**YOUR BUSINESS POSITION**
- Substitute Teacher
- Board Member

**NAME OF LEADER**
- Daryl Hickman

**ADDRESS *(Business Address Acceptable)***
- 545 Chaney St. Lake Elsinore, 92530
- 1825 3rd St. Riverside CA

**BUSINESS ACTIVITY, IF ANY, OF SOURCE**
- Substitute Teacher
- Board Member

<table>
<thead>
<tr>
<th><strong>GROSS INCOME RECEIVED</strong></th>
<th><strong>GROSS INCOME RECEIVED</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ $500 - $1,000</td>
<td>☐ $500 - $1,000</td>
</tr>
<tr>
<td>☐ $10,001 - $100,000</td>
<td>☐ $10,001 - $100,000</td>
</tr>
<tr>
<td>☑ $1,001 - $10,000</td>
<td>☑ $1,001 - $10,000</td>
</tr>
<tr>
<td>☐ OVER $100,000</td>
<td>☐ OVER $100,000</td>
</tr>
</tbody>
</table>

**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

<table>
<thead>
<tr>
<th>2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD</th>
</tr>
</thead>
</table>

*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><strong>NAME OF LENDER</strong></th>
<th><strong>INTEREST RATE</strong></th>
<th><strong>TERM (Months/Years)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ None</td>
<td></td>
</tr>
</tbody>
</table>

**SECURITY FOR LOAN**
- ☐ None
- ☑ Personal residence

<table>
<thead>
<tr>
<th><strong>REAL PROPERTY</strong></th>
<th><strong>STREET ADDRESS</strong></th>
</tr>
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<tbody>
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<table>
<thead>
<tr>
<th><strong>GUARANTOR</strong></th>
<th><strong>CITY</strong></th>
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<table>
<thead>
<tr>
<th><strong>OTHER</strong></th>
<th><strong>DESCRIBE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**HIGH BALANCE DURING REPORTING PERIOD**
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

**Comments:**