## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS CLER Micial Use Only

**COVER PAGE** 

16 AUG 11 PM 2: 18

Please type or print in ink.	10 1100 11 111 =
NAME OF FILER (LAST) (FIRST) $RAMOS \qquad \qquad \angle EE$	CITY OF COSTA MESA
1. Office, Agency, or Court	Level 1 and a state of the stat
Agency Name (Do not use acronyms)	
Division, Board, Department, District, if applicable	Your Position
▶ If filing for multiple positions, list below or on an attachment. (Do no	t use acronyms)
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	$\square$ County of $\square$ CRANGE
Multi-County  City of COSTA MESA	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2015, through	Leaving Office: Date Left /2, /, 20
December 31, 2015.	(Check one)
The period covered is, throug December 31, 2015.	leaving οπice.
Assuming Office: Date assumed 121116	O The period covered is, through the date of leaving office.
Candidate: Election year 2016 and office sough	t, if different than Part 1:
4. Schedule Summary (must complete) ► Total number of pages including this cover page:	
Schedules attached	
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or-	
None - No reportable interests on any schedule	TA MESA CA 92627
5. Verification  MAILING ADDRESS STREET CITY	TA MESA CA 92627 STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)	
DAYTIME TELEPHONE NUMBER (949 439 - 9200	E-MAIL ADDRESS Troggy 5578@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 8 - 8 - 16	Signature
(month, day, year)	(File the originally signed statement with your filing official.)