# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

# STATEMENT OF ECONOMIC INTERESTS

COVER PAGEY CLERK

Please type or print in ink.

| NAME OF FILER (LAST) |   |                  | (FIRE 1012 AUG -9 PM 1: 02 (MIDDLE)              |  |                                   |
|----------------------|---|------------------|--|--|-----------------------------------|
| W                    | /eitzberg   | Harold           |  |  |                                   |
| 1.                   | Office, Agency, or Court  |                  | CITY OF U  | JUSTA MEJA   |                                   |
|                      | Agency Name   |                  | BY   | The state of the s | 45                                |
|                      | City of Costa Mesa  |                  |  |  |                                   |
|                      | Division, Board, Department, District, if applicable  |                  | Your Position                                    |  |                                   |
|                      | City Council  |                  | City Council I                                   | Member   |                                   |
|                      | ▶ If filing for multiple positions, list below or on an attachment.   |                  |  |  |                                   |
|                      | Agency:   |                  | Position:  |  |                                   |
| 2.                   | Jurisdiction of Office (Check at least one box)   |                  |  |  |                                   |
|                      | ☐ State   |                  | ☐ Judge or Court C                               | Commissioner (Sta  | atewide Jurisdiction)             |
|                      | Multi-County  |                  | County of  |  |                                   |
|                      | ☑ City of Costa Mesa  |                  |  |  |                                   |
| FOR STREET           | Ex only or  |                  |  |  |                                   |
| 3.                   | Type of Statement (Check at least one box)  |                  |  |  |                                   |
|                      | Annual: The period covered is January 1, 2011, through December 31, 2011.   |                  | Leaving Office:<br>(Check one)                   | Date Left  | J                                 |
|                      | The period covered is/  | through          | <ul> <li>The period of leaving office</li> </ul> |  | , 1, 2011, through the date of    |
|                      | Assuming Office: Date assumed/  | _                |  | covered is/  | , through                         |
|                      | ▼ Candidate: Election Year 2012 Office sou  | ught, if differe | nt than Part 1:                                  |  |                                   |
| 4.                   | Schedule Summary  |                  |  |  |                                   |
|                      | Check applicable schedules or "None."   | ► Total nu       | ımber of pages in                                | cluding this d   | cover page:                       |
|                      | Schedule A-1 - Investments - schedule attached  | X                | Schedule C - Income                              | Loans, & Busine  | ess Positions – schedule attached |
|                      | Schedule A-2 - Investments – schedule attached  |                  | Schedule D - Income                              |  |                                   |
|                      | Schedule B - Real Property – schedule attached  |                  | Schedule E - Income                              | – Gifts – Travel F   | Payments – schedule attached      |
|                      | -or-<br>None - No reporte   | able interests   | on any schedule                                  |  |                                   |
| 5.                   | Verification  |                  |  |  |                                   |
|                      | MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)   | CITY             |  | STATE  | ZIP CODE                          |
|                      | 2065 Flamingo Drive   | Costa Me         |  | CA   | 92626                             |
|                      | DAYTIME TELEPHONE NUMBER  | 1                | MAIL ADDRESS (OPTIONAL)                          |  |                                   |
|                      | ( 714 ) 313 6334  |                  | weitzberg@cs.co                                  |  | outodes the information contained |
|                      | I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information containe herein and in any attached schedules is true and complete. I acknowledge this is a public document. |                  |  |  | owledge the information contained |
|                      | I certify under penalty of perjury under the laws of the State of   | of California    | that the foregoing in                            | true and correct   |                                   |
|                      | Date Signed   | Sign             | ature  |  |                                   |

#### **SCHEDULE A-1** Investments

# Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name  |
| Harold Weitzberg  |

| ▶   | NAME OF BUSINESS ENTITY                                   | 1 [     | ► NAME OF BUSINESS ENTITY  |
|-----|---|---------|--|
|     | Monsanto  | П       | Fidelity China Region  |
|     | GENERAL DESCRIPTION OF BUSINESS ACTIVITY                  | $\ $    | GENERAL DESCRIPTION OF BUSINESS ACTIVITY   |
|     | Seed Company  | Ш       | Mutual Fund  |
|     | FAIR MARKET VALUE   | H       | FAIR MARKET VALUE  |
|     | <b>X</b> \$2,000 - \$10,000                               | П       | <b>X</b> \$2,000 - \$10,000  |
|     | \$100,001 - \$1,000,000 Over \$1,000,000                  | П       | \$100,001 - \$1,000,000 Over \$1,000,000   |
|     |   | П       | [_] Over \$1,000,000   |
|     | NATURE OF INVESTMENT                                      | $\  \ $ | NATURE OF INVESTMENT   |
|     | Stock Other(Describe)                                     | П       | Stock X Other Mutual Fund  |
|     | Partnership O Income Received of \$0 - \$499              | П       | (Describe) Partnership O Income Received of \$0 - \$499  |
|     | O Income Received of \$500 or More (Report on Schedule C) | П       | O Income Received of \$500 or More (Report on Schedule C.  |
|     |   | П       | The state of the s |
|     | IF APPLICABLE, LIST DATE:                                 | Н       | IF APPLICABLE, LIST DATE:  |
|     |   | П       |  |
|     | ACQUIRED DISPOSED   | H       |  |
| _   | NAME OF BUSINESS ENTITY                                   | ╁       |  |
|     | NAME OF BUSINESS ENTITY                                   |         | ► NAME OF BUSINESS ENTITY  |
|     |   | ı       |  |
|     | GENERAL DESCRIPTION OF BUSINESS ACTIVITY                  | П       | GENERAL DESCRIPTION OF BUSINESS ACTIVITY   |
|     |   |         |  |
|     |   |         |  |
|     | FAIR MARKET VALUE   | ļ       | FAIR MARKET VALUE  |
|     | \$2,000 - \$10,000 \$10,001 - \$100,000                   |         | \$2,000 - \$10,000   |
|     | S100,001 - \$1,000,000 Over \$1,000,000                   |         | \$100,001 - \$1,000,000 Over \$1,000,000   |
|     | NATURE OF INVESTMENT                                      | ı       | Value Value  |
|     | Stock Other   |         | NATURE OF INVESTMENT   |
|     | (Describe)  | İ       | Stock Other (Describe)   |
|     | Partnership O Income Received of \$0 - \$499              | ı       | Partnership O Income Received of \$0 - \$499   |
|     | O income Received of \$500 or More (Report on Schedule C) | ļ       | O income Received of \$500 or More (Report on Schedule C)  |
|     |   | ı       |  |
|     | IF APPLICABLE, LIST DATE:                                 | ı       | IF APPLICABLE, LIST DATE:  |
|     |   | ı       |  |
|     | ACQUIRED DISPOSED   |         | /  |
|     |   | ŀ       | Vodotused DIPAG2ED   |
| •   | NAME OF BUSINESS ENTITY                                   | Ţ       | ► NAME OF BUSINESS ENTITY  |
|     |   | ı       |  |
|     | GENERAL DESCRIPTION OF BUSINESS ACTIVITY                  |         | GENERAL DESCRIPTION OF BUSINESS ACTIVITY   |
|     |   | ļ       |  |
|     |   | ı       |  |
|     | FAIR MARKET VALUE   |         | FAIR MARKET VALUE  |
|     | \$2,000 - \$10,000 \$10,001 - \$100,000                   | ı       | \$2,000 - \$10,000 \$10,001 - \$100,000  |
| ı   | \$100,001 ~ \$1,000,000 Over \$1,000,000                  | ı       | \$100,001 - \$1,000,000 Over \$1,000,000   |
|     |   | 1       |  |
| ſ   | VATURE OF INVESTMENT                                      | ı       | NATURE OF INVESTMENT   |
| I   | Stock Other (Describe)                                    | ı       | Stock Other  |
| [   | Partnership O Income Received of \$0 - \$499              |         | (Describe)  Partnership () Income Received of \$0 - \$499  |
|     | O Income Received of \$500 or More (Report on Schedule C) |         | O Income Received of \$500 or More (Report on Schedule C)  |
|     | E A DOUGLE DE LOS DAMES                                   |         | - The state of the first of deligible of   |
| 1   | F APPLICABLE, LIST DATE:                                  | Ī       | IF APPLICABLE, LIST DATE:  |
|     |   |         | , , 14   |
| ٠   | ACQUIRED DISPOSED   | ı       | //   |
|     |   | f       | ACQUIRED DISPOSED  |
| ٠.  | ******  |         |  |
| .01 | nments:   |         |  |

### **SCHEDULE A-2** Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

| CALIFORNIA FORM 700                 |
|-------------------------------------|
| FAIR POLITICAL PRACTICES COMMISSION |
| Name                                |
| Harold Weitzberg                    |

| ▶ 1. BUSINESS ENTITY OR TRUST   | ► 1. BUSINESS ENTITY OR TRUST   |
|---|---|
| Weitzberg Consulting, Inc.  | Against The Grain Productions, LLC  |
| Name 2065 Flamingo Drive, Costa Mesa, CA 92626 Address (Business Address Acceptable)  | Name 2065 Flamingo Drive, Costa Mesa, CA 92626 Address (Business Address Acceptable)                                      |
| Check one  Trust, go to 2  Business Entity, complete the box, then go to 2  | Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2  |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY  Business Consulting and Coaching  | GENERAL DESCRIPTION OF BUSINESS ACTIVITY  Television and Web Media Program  |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE:    \$0 - \$1,999  | FAIR MARKET VALUE IF APPLICABLE, LIST DATE:    \$30 - \$1,999   |
| NATURE OF INVESTMENT Sole Proprietorship Partnership Corporation  | NATURE OF INVESTMENT ☐ Sole Proprietorship ☐ Partnership ☐ LLC  |
| YOUR BUSINESS POSITION President  | YOUR BUSINESS POSITION General Manager  |
| ► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)   | ► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)             |
| \$0 - \$499   | \$10,001 - \$100,000<br>\$500 - \$1,000 OVER \$100,000<br>\$1,001 - \$10,000  |
| 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  Kluis Publishing, Judy Foods, Castle of Dreams, Icon Development Group, Revenue Management Systems | ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheef if necessary.) |
| ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE<br>BUSINESS ENTITY OR TRUST   | ► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST                               |
| Check one box:  INVESTMENT REAL PROPERTY  | Check one box:  INVESTMENT REAL PROPERTY  |
| Name of Business Entity, if Investment, <u>or</u><br>Assessor's Parcel Number or Street Address of Real Property  | Name of Business Entity, If Investment, or Assessor's Parcel Number or Street Address of Real Property                    |
| Description of Business Activity <u>or</u><br>City or Other Precise Location of Real Property   | Description of Business Activity <u>or</u><br>City or Other Precise Location of Real Property                             |
| FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   / 11   | FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000     \$10,001 - \$100,000       11       11       11    |
| NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership   | NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership   |
| Leasehold Other   | Leasehold Other   |
| Check box if additional schedules reporting investments or real property are attached   | Check box if additional schedules reporting investments or real property are attached                                     |
| Comments:   | EPPC Form 700 (2011/2012) Cab. A 2  |

### **SCHEDULE B** Interests in Real Property (Including Rental Income)

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name  |
| Harold Weitzberg  |

| ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS   | ► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS   |
|--|--|
| Shady Rest Development   |  |
| CITY   | CITY   |
| Mammoth, CA  |  |
| FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   | FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000   |
| NATURE OF INTEREST   | NATURE OF INTEREST   |
| Ownership/Deed of Trust Easement   | Ownership/Deed of Trust Easement   |
| Leasehold  | Leasehold  |
| IF RENTAL PROPERTY, GROSS INCOME RECEIVED  | IF RENTAL PROPERTY, GROSS INCOME RECEIVED  |
| \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000   | \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000   |
| \$10,001 ~ \$100,000 OVER \$100,000  | S10,001 - \$100,000 OVER \$100,000   |
| SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of  | SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  |
| income of \$10,000 or more.  | 1 1  |
| Income of \$10,000 or more.  |  |
| You are not required to report loans from commercia  | al lending institutions made in the lender's regular course of ic without regard to your official status. Personal loans and siness must be disclosed as follows:                                |
| You are not required to report loans from commercia business on terms available to members of the publi  | ic without regard to your official status. Personal loans and  |
| You are not required to report loans from commercial business on terms available to members of the publicans received not in a lender's regular course of business.  | ic without regard to your official status. Personal loans and siness must be disclosed as follows:   |
| You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu  | ic without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  |
| You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  | ic without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER |
| You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  | ic without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)                                       |
| You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  | ic without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*  |
| You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business (Business Address Acceptable)  BUSINESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  HIGHEST BALANCE DURING REPORTING PERIOD                   | ic without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*  |
| You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business (Business Address Acceptable)  BUSINESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  Whighest Balance during reporting period  \$500 - \$1,000 | ic without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*  |
| You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business (Business Address Acceptable)  BUSINESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  HIGHEST BALANCE DURING REPORTING PERIOD                   | ic without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*  |

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name  |
| Harold Weitzberg  |

| ► 1. INCOME RECEIVED   | ► 1. INCOME RECEIVED  |
|--|---|
| NAME OF SOURCE OF INCOME   | NAME OF SOURCE OF INCOME  |
| Pain Releaf Center   | Pain Releaf Center  |
| ADDRESS (Business Address Acceptable)  | ADDRESS (Business Address Acceptable)                             |
| 660 Baker Street   | 660 Baker Street  |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE   | BUSINESS ACTIVITY, IF ANY, OF SOURCE                              |
| Nutritional Supplements and Herbal Medicine  | Nutritional Supplements and Herbal Medicine                       |
| YOUR BUSINESS POSITION   | YOUR BUSINESS POSITION  |
| Consultant   | Consultant  |
| GROSS INCOME RECEIVED  | GROSS INCOME RECEIVED   |
| \$500 - \$1,000 \$1,001 - \$10,000   | \$500 - \$1,000\$1,001 - \$10,000                                 |
| ▼ \$10,001 - \$100,000   | ▼ \$10,001 - \$100,000 □ OVER \$100,000                           |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED  | CONSIDERATION FOR WHICH INCOME WAS RECEIVED                       |
| Salary Spouse's or registered domestic partner's income  | Salary Spouse's or registered domestic partner's income           |
| Loan repayment Partnership   | 🔀 Loan repayment 🔲 Partnership                                    |
| Sale of  | Sale of   |
| (Real property, car, boat, etc.)   | (Real property, car, boat, etc.)                                  |
| Commission or Rental Income, list each source of \$10,000 or more  | Commission or Rental Income, list each source of \$10,000 or more |
|  |   |
|  |   |
| Other(Describe)  | Other (Describe)  |
|  |   |
| ▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIO  | OD  |
| * You are not required to report loans from commercial ler   | nding institutions, or any indebtedness created as part of a      |
| retail installment or credit card transaction, made in the l   | lender's regular course of business on terms available to         |
| members of the public without regard to your official stated regular course of business must be disclosed as follows | tus. Personal loans and loans received not in a lender's          |
| regular course of pushtess must be disclosed as follows  | •   |
| NAME OF LENDER*  | INTEREST RATE TERM (Months/Years)                                 |
|  | % None  |
| ADDRESS (Business Address Acceptable)  |   |
| BUSINESS ACTIVITY IS ANY OF LENDED   | SECURITY FOR LOAN  None  Personal residence                       |
| BUSINESS ACTIVITY, IF ANY, OF LENDER   | None Personal residence   |
|  | Real Property   |
| HIGHEST BALANCE DURING REPORTING PERIOD  | Sueat attaless  |
| <u>\$500 - \$1,000</u>   | City  |
| \$1,001 - \$10,000<br>   | Guarantor   |
| S10,001 - \$100,000  |   |
| OVER \$100,000   | Other   |
|  | (Describe)  |
|  |   |
| Comments:  |   |