### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

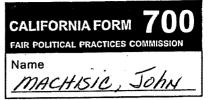
A Public Document

Pate Received E	
MAR 8 2007	
B City Clerk's Office	_

Please type or print in ink

NAME (LAST) (FIRST)	(MIDDLE) DAYTIME TELEPHONE NUMBER
MACHISIC, JOHN	(951)845-8343
MAILING ADDRESS STREET CITY (May use business address)	STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS
5384 PlAIN Field DR., BANNI	NG (A 92220
SSC   PRAJATIES ON, CHIER	
1. Office, Agency, or Court	4. Schedule Summary
Name of Office, Agency, or Court:	→ Total number of pages
CITY COUNCIL	including this cover page:
Division, Board, District, if applicable:	→ Check applicable schedules or "No reportable interests."
Your Position:	I have disclosed interests on one or more of the attached schedules:
■ If filing for multiple positions, list additional agency(ies)/	Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)
position(s): (Attach a separate sheet if necessary.)  Agency:	Schedule A-2 Yes – schedule attached  Investments (10% or greater Ownership)
Position:	Schedule B Yes – schedule attached
r osmon.	
2. Jurisdiction of Office (Check at least one box)	Schedule C Yes – schedule attached  Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
☐ State ☐ County of	Schedule D Yes – schedule attached  Income – Gifts
County of	Schedule E
Other	-or-
3. Type of Statement (Check at least one box)	No reportable interests on any schedule
Assuming Office/Initial Date:/	5. Verification
Annual: The period covered is January 1, 2006, through December 31, 2006.	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best
-or-	of my knowledge the information contained herein and in any
O The period covered is/, through December 31, 2006.	attached schedules is true and complete.  I certify under penalty of perjury under the laws of the State
Leaving Office Date Left:/(Check one)	of California that the foregoing is true and correct.
O The period covered is January 1, 2006, through the date of leaving office.  -Or-	Date Signed 3 6 07 (molth, day, year)
O The period covered is/, through the date of leaving office.	Signature (File the Cognally signed statement with your filing official.)
☐ Candidate	

# SCHEDULE D Income - Gifts



			> NAME OF	COURCE	:	
NAME OF SOURCE			LI	SOURCE	•	**************************************
BURKE	WILLIAM	MS 4 SORENSEW, L	A			
ADDRESS		300, Riverside, CA	ADDRESS	3		
3403 Te	NH St., Ste	300, Kiverside, CH			T. IF AND OF CO.	IDOC
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LAWI	FIRM					DESCRIPTION OF CITTES
DATE (mm/dd/yy)		DESCRIPTION OF GIFT(S)	DATE (mr	m/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	s 178,29	TOTAL  DESCRIPTION:  League of Cities Din			\$	
9, 106	s 140.29	League of Cities Din	nee		\$	
12, 106	s 38.00	Chocolate Pizza		J	\$	
> NAME OF SOURCE	Ē		> NAME OF	FSOURCE		
ADDRESS			ADDRESS	S		*
THE PARTY ACTOR	TY, IF ANY, OF SOL	IRCE	BUSINES	S ACTIVI	TY, IF ANY, OF SO	URCE
BUSINESS ACTIVI	TH, IF ANI, OF SOC	, , , , , , , , , , , , , , , , , , ,				
	VALUE	DESCRIPTION OF GIFT(S)	DATE (m	m/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF OUR NO.				
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			> NAME OF	SOURCE	<u></u>	
> NAME OF SOURCE	<b>E</b>					
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ADDRESS			1 7.001.20			
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BUSINESS ACTIVI	TI, IF ANT, OF SOC	···-				
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (m	m/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
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### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A Public Document

Please type or print in ink

lease type or print in ink	(MIDDLE) DAYTIME TELEPHONE NUMBER
AME (LAST) (FIRST)	(951)845-8343
MACHISIC JOHN AILING ADDRESS STREET CITY	STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS
Alling ADDRESS STREET CITY May use business address)  5384 Plain Field Dr., Banning	
5384 PLAIN FIELD UK, DANNING	3) (
1. Office, Agency, or Court	4. Schedule Summary
Name of Office, Agency, or Court:	→ Total number of pages including this cover page:
Division, Board, District, if applicable:	➡ Check applicable schedules or "No reportable interests."
Your Position:	I have disclosed interests on one or more of the attached schedules:
<ul> <li>         MAYOR         If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)     </li> </ul>	Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)  Schedule A-2 Yes – schedule attached Investments (10% or greater Ownership)
Agency: Committee member	Schedule B Yes – schedule attached  Real Property
2. Jurisdiction of Office (Check at least one box)	Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
State County of	Schedule D    Yes - schedule attached   Income - Gifts
City of BANN ING	Schedule E Yes – schedule attached Income – Travel Payments
☐ Multi-County	-or-
	No reportable interests on any schedule
3. Type of Statement (Check at least one box)  Assuming Office/Initial Date: 1 9 07	5. Verification
Annual: The period covered is January 1, 2006, through December 31, 2006.  -Or-  O The period covered is, through	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.
December 31, 2006.  Leaving Office Date Left:/	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
(Check one) O The period covered is January 1, 2006, through the date of leaving office.	Date Signed 3 6 (nonth, day, year)
O The period covered is, through the date of leaving office.	Signature (File the originally signed statement with your liting official.)
Candidate	FPPC Form 700 (2006/200

## STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

### **COVER PAGE**

Please type or print in ink

A Public Document

(FIRST)	(MIDDLE) DAYTIME TELEPHONE NUMBER
NAME (LAST)	(951)845-8343
MACHISIC, JOHN	STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS
MAILING ADDRESS	
(May use business address) 5384 Plain Field Dr., BANNI	NG, CA 92220
1. Office, Agency, or Court	4. Schedule Summary
Name of Office, Agency, or Court:	→ Total number of pages
CITY COUNCIL	including this cover page:
Division, Board, District, if applicable:	→ Check applicable schedules or "No reportable interests."
Your Position:	I have disclosed interests on one or more of the attached schedules:
<ul> <li>MAYOR</li> <li>■ If filing for multiple positions, list additional agency(ies)/</li> </ul>	Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)
position(s): (Attach a separate sheet if necessary.)  **ESTERN RIVERSIDE COUNCIL*  Agency: OF GOVERNMENTS	Schedule A-2 Yes – schedule attached Investments (10% or greater Ownership)
Position: BOALD MEMBER	Schedule B
2. Jurisdiction of Office (Check at least one box)	Schedule C Yes — schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
☐ State	Schedule D Yes – schedule attached
County of	Schedule E  Yes – schedule attached  Income – Travel Payments
Multi-County	-or-
Other	No reportable interests on any schedule
3. Type of Statement (Check at least one box)	
Assuming Office/Initial Date:	5. Verification
Annual: The period covered is January 1, 2006, through December 31, 2006.  -Or-  O The period covered is, through	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.
December 31, 2006.	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
(Check one)  O The period covered is January 1, 2006, through the date of leaving office.	Date Signed 3 / 6 (mdnth, day/year)
O The period covered is, through the date of leaving office.	Signature (File the occurrance signed statement with your filing official.)
☐ Candidate	FPPC Form 700 (2006/2007

FPPC Form 700 (2006/2007) FPPC Toll-Free Helpline: 866/ASK-FPPC

### STATEMENT OF ECONOMIC INTERESTS

Date Received

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		· · · · · · · · · · · · · · · · · · ·	
NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
MACHISIC	John		(951)845-8343
MAILING ADDRESS STREET (May use business address)	CITY	STATE ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS
5384 Plain	I Field DR., BANA	VING, CA 92220	
1. Office. Agency. or	Court	4. Schedule Summa	ary

5384 Plain Field DR., BANNI	NG, CA 92220
1. Office, Agency, or Court	4. Schedule Summary
Name of Office, Agency, or Court:	→ Total number of pages including this cover page:
Division, Board, District, if applicable:	→ Check applicable schedules or "No reportable interests."
Your Position:	I have disclosed interests on one or more of the attached schedules:
<ul> <li></li></ul>	Schedule A-1 Yes — schedule attached Investments (Less than 10% Ownership)
WESTERN RIVERSIDE COUNTY .  Agency: REGIONAL CONSERVATION AUTHOLITY	Schedule A-2  Yes – schedule attached  Investments (10% or greater Ownership)
Position: BOARD MEMBER	Schedule B Yes – schedule attached Real Property
2. Jurisdiction of Office (Check at least one box)	Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
☐ State	Schedule D X Yes - schedule attached
County of	Schedule E Yes – schedule attached
Multi-County	Income – Travel Payments -OF-
Other	No reportable interests on any schedule
3. Type of Statement (Check at least one box)	
Assuming Office/Initial Date:/	5. Verification
Annual: The period covered is January 1, 2006, through December 31, 2006.	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best
O The period covered is/, through December 31, 2006.	of my knowledge the information contained herein and in any attached schedules is true and complete.
Leaving Office Date Left:/(Check one)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
O The period covered is January 1, 2006, through the date of leaving office.	Date Signed 3 6 07 (mobth, day, year)
O The period covered is/, through the date of leaving office.	Signature Di aching
Candidate	(File the originally signed statement with your filing official.)

FPPC Form 700 (2006/2007) FPPC Toll-Free Helpline: 866/ASK-FPPC

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## STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

### **COVER PAGE**

A Public Document

ase type or print in ink  MF (LAST)	(FIRST)	(MIDDLE) DAYTIME TELEPHONE NUMBER
		(951)845-8343
MACHISIC JOHN	CITY	STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRES
ay use business address)	7 7	14 92220
by use business address)  5384 Plain Field	UR, BAHMIN	ig, CH Tack
		4. Schedule Summary
. Office, Agency, or Court		⇒ Total number of pages
Name of Office, Agency, or Court:		including this cover page:
CITY COUNCIL		➡ Check applicable schedules or "No reportable
Division, Board, District, if applicable:	* .	interests."
Your Position:		I have disclosed interests on one or more of the attached schedules:
MAYOR		Schedule A-1  Yes – schedule attached
- If fling for multiple positions, list addi	tional agency(ies)/	Investments (Less than 10% Ownership)
position(s): (Attach a separate sneet	II Hecessary.	Schedule A-2
SOUTHERN CALIFORNIA Agency: ASSOCIATION OF GOVERNME	ents (SCAG)	Investments (10% or greater Ownership)
Agency. 1222-3.		Schedule B
Position: DELEGATE		Real Property
		Schedule C Yes - schedule attached
2. Jurisdiction of Office (Check a	nt least one box)	Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
☐ State		Schedule D X Yes - schedule attached
County of		Income – Gifts
Scity of BANNING		Schedule E Yes - schedule attached
Multi-County		Income - Travel Payments
<b>—</b>		-or-
Other		No reportable interests on any schedule
3. Type of Statement (Check at le	east one box)	
Assuming Office/Initial Date:		5. Verification
Annual: The period covered is Janua	ary 1, 2006,	I have used all reasonable diligence in preparing this
through December 31, 2006.		statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any
-Or-	/ through	attached schedules is true and complete.
O The period covered is	i	I certify under penalty of perjury under the laws of the State
Leaving Office Date Left: 19	107	of California that the foregoing is true and correct.
(Check one)		
O The period covered is January 1,	2006, through	3 6 07
the date of leaving office.		Date Signed (month, day, year)
-or-	/ through	- Chinitian
O The period covered is the date of leaving office.	J, unrough	Signature

DAYTIME TELEPHONE NUMBER

( 951) 845-8343 OPTIONAL: FAX / E-MAIL ADDRESS

# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A Public Document

(MIDDLE)

ZIP CODE

☐ Candidate

NAME (LAST) (FIRST)
MACHISIC, John
MAILING ADDRESS STREET CITY (May use business address)
5384 Plain Field Dr., Banni
3304 Flam Fleta 22.7 24
1. Office, Agency, or Court
Name of Office, Agency, or Court:  50. California Association of GOVERNETTS
Division, Board, District, if applicable:
Your Position:
DELE GATE
➡ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)
Agency:
Position:
2. Jurisdiction of Office (Check at least one box)
∑ State
County of
City of
Multi-County
Other
3. Type of Statement (Check at least one box)
Assuming Office/Initial Date:
Annual: The period covered is January 1, 2006, through December 31, 2006.
-or-
December 31, 2006.
Leaving Office Date Left: 1 9 07 (Check one)
O The period covered is January 1, 2006, through the date of leaving office.
-or-
O The period covered is/, through the date of leaving office.

ng,	CA 92220
1	4. Schedule Summary
	→ Total number of pages including this cover page:2
	Check applicable schedules or "No reportable interests."  I have disclosed interests on one or more of the
	attached schedules:
	Schedule A-1  Yes – schedule attached Investments (Less than 10% Ownership)
	Schedule A-2 Yes – schedule attached Investments (10% or greater Ownership)
	Schedule B Yes – schedule attached  Real Property
]	Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
	Schedule D Yes – schedule attached Income – Gifts
	Schedule E Yes - schedule attached Income - Travel Payments
	-or-
]	No reportable interests on any schedule

#### 5. Verification

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed .

3-30-07

Signature

Mine

FPPC Form 700 Amendment (2006/2007) FPPC Toll-Free Helpline: 866/ASK-FPPC

DAYTIME TELEPHONE NUMBER

951) 845-8343 OPTIONAL: FAX / E-MAIL ADDRESS

### CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

### STATEMENT OF ECONOMIC INTERESTS

#### **COVER PAGE**

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(MIDDLE)

ZIP CODE

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Please type or print in ink	(ANDOLE
NAME (LAST) (FIRST)	(MIDDLE
MACHISIC, John	AT-77
MAILING ADDRESS STREET CITY (May use business address)	STATE
5384 Plain Field Dr., Banni	ng, CA 92220
1. Office, Agency, or Court	4. Schedul
Name of Office, Agency, or Court: Riverside County	Total numbe including thi
Division, Board, District, if applicable:  Indian Gaming Local Benefit Committee  Your Position:	Check application interests."  I have disclopattached sch
■ If filing for multiple positions, list additional agency(ies)/	Schedule A-
position(s): (Attach a separate sheet if necessary.)  Agency:	Schedule A-2
Position:	Schedule B Real Property
2. Jurisdiction of Office (Check at least one box)	Schedule C Income, Loan and Travel Paym
State  Scounty of Riverside	Schedule D Income – Gift
City of	Schedule E Income – Trav
Other	No report
3. Type of Statement (Check at least one box)	
Assuming Office/Initial Date: 1907	5. Verification
Annual: The period covered is January 1, 2006, through December 31, 2006.  -Or-  O The period covered is/, through	I have used a statement. I ha of my knowledg attached sched
December 31, 2006.  Leaving Office Date Left:/	I certify under p of California th
(Check one)  O The period covered is January 1, 2006, through the date of leaving office.  -Or-	Date Signed _
O The period covered is/, through the date of leaving office.	Signature

Candidate

4. Schedule Summary
→ Total number of pages including this cover page:2
→ Check applicable schedules or "No reportable interests."
I have disclosed interests on one or more of the attached schedules:
Schedule A-1  Yes – schedule attached Investments (Less than 10% Ownership)
Schedule A-2 Yes – schedule attached Investments (10% or greater Ownership)
Schedule B Yes – schedule attached  Real Property
Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
Schedule D Yes – schedule attached Income – Gifts
Schedule E Yes – schedule attached Income – Travel Payments
-or-
No reportable interests on any schedule
5. Verification
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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date Signed 3-30-07 (month, day, year)
Signature Mullism

FPPC Form 700 Amendment (2006/2007) FPPC Toll-Free Helpline: 866/ASK-FPPC

DAYTIME TELEPHONE NUMBER

( 951) 845-8343

OPTIONAL: FAX / E-MAIL ADDRESS

### CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISSION AMENDMENT

### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A Public Document

(MIDDLE)

ZIP CODE

	AI	uonc	Document
Please type or print in ink	(FIRST)		(MIDDLE
NAME (LAST)	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•
MACHISIC, John MAILING ADDRESS STREET	CIŢY		STATE
(May use business address)			
5384 Plain Field	Dr., Banni	ng,	CA 92220
1. Office, Agency, or Court		] [	4. Schedule
Name of Office, Agency, or Court:			➡ Total number
Riverside County			including this
Division, Board, District, if applicable:		,	→ Check applic
Regional Consevation A	othority		interests."
Your Position:	1		I have disclo attached sch
Board member			Schedule A-1
→ If filing for multiple positions, list add	litional agency(ies)/		Investments (
position(s): (Attach a separate sheet	t if necessary.)		Schedule A-2
Agency:			Investments (
			Schedule B
Position:		]	Real Property
O Living diction of Office (Charle	of least one box	1	Schedule C Income, Loans
2. Jurisdiction of Office (Check	at least one box)		and Travel Paym
State   Scounty of Riverside			Schedule D
City of			Income - Gifts
			Schedule E Income – Trav
Multi-County			
Other		]	
3. Type of Statement (Check at I	least one box)	1	☐ No report
		ļ <u>-</u>	
Assuming Office/Initial Date:			5. Verification
Annual: The period covered is Janua	ary 1, 2006,		l have used a
through December 31, 2006.			statement. I hat of my knowledge
O The period covered is	/, through		attached sched
December 31, 2006.			l certify under p
Leaving Office Date Left:/(Check one)			of California th
O The period covered is January 1,	2006, through		
the date of leaving office.			Date Signed
O The period covered is	/, through		
the date of leaving office.	- -	1 1.	Signature

☐ Candidate

4. Schedule Summary
→ Total number of pages including this cover page:2
→ Check applicable schedules or "No reportable interests."
I have disclosed interests on one or more of the attached schedules:
Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)
Schedule A-2 Yes – schedule attached  Investments (10% or greater Ownership)
Schedule B Yes – schedule attached Real Property
Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
Schedule D Yes – schedule attached Income – Gifts
Schedule E Yes – schedule attached Income – Travel Payments
-or-
No reportable interests on any schedule
5. Verification
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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
2 20.07

FPPC Form 700 Amendment (2006/2007) FPPC Toll-Free Helpline: 866/ASK-FPPC

### CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A Public Document

(MIDDLE)

STATE

ZIP CODE

Determine Temporal E	
MAR 3 2008	
B Coty Clubs office	
DAYTIME TELEPHONE NUMBER	

OPTIONAL: FAX / E-MAIL ADDRESS

(951) 845-8343

Please type or print in ink.

NAME (LAST)	(i into i)
MACHISIC, John	
MAILING ADDRESS STREET (May use business address)	CITY
5384 Plain Field Dr., Banning, CA	92220
A Office Areney or Cour	4
1. Office, Agency, or Cour Name of Office, Agency, or Court:	<u> </u>
City Council	
Division, Board, District, if applicable	e:
Your Position:	
Council Member	
→ If filing for multiple positions, list position(s): (Attach a separate)	t additional agency(ies)/ sheet if necessary.)
Agency:	
Position:	
2. Jurisdiction of Office (C	Check at least one box)
☐ State	
County of	
☑ City of BANNING	
☐ Multi-County	
Other	
3. Type of Statement (Che	
☐ Assuming Office/Initial Da	te:/
Annual: The period covered is through December 31, 2007.	January 1, 2007,
O The period covered is	/ / through
December 31, 2007.	,, unough
Leaving Office Date Left: (Check one)	
O The period covered is Janua date of leaving office.	ary 1, 2007, through the
O The period covered isthe date of leaving office.	/, through
☐ Candidate	

4. Schedule Summary				
→ Total number of pages including this cover page:2				
➡ Check applicable schedules or "No reportable interests."				
I have disclosed interests on one or more of the attached schedules:				
Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)				
Schedule A-2 Yes – schedule attached Investments (10% or greater Ownership)				
Schedule B Yes – schedule attached  Real Property				
Schedule C Yes - schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)				
Schedule D X Yes – schedule attached Income – Gifts				
Schedule E Yes – schedule attached Income – Travel Payments				
-or-				
No reportable interests on any schedule				
5. Verification				

Signature Market Signature

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

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

attached schedules is true and complete.

FPPC Form 700 (2007/2008) FPPC Toll-Free Helpline: 866/ASK-FPPC

# SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

MACHISIC, John

NAME OF SOURCE	> NAME OF SOURCE
Burke, Williams & Sorensen, LLP	
ADDRESS	ADDRESS
2280 Market Street, Ste. 300, Riverside, CA 92501	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm	DATE (mm/dd/w) VALUE DESCRIPTION OF GIFT(S)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
9 / / 07 s 126.04 League of Calif. Cities	
12 / 07 s 39.00 Chocolate Pizza	
> NAME OF SOURCE	> NAME OF SOURCE
Edward Del La Rosa - Del La Rosa & Associates	
ADDRESS	ADDRESS
10866 Wilshire Blvd., Ste. 1650, Los Angeles, CA	BUSINESS ACTIVITY, IF ANY, OF SOURCE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Underwriters - Investment Bankers	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (minutally)) VALUE DESCRIPTION
11 , 28 , 07 s 30.00 Bottle of Wine	\$
\$	
> NAME OF SOURCE	> NAME OF SOURCE
ADDRESS	ADDRESS
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
Character Cities (Dinner): Character	Pizza (Christmas Gift)
Comments: League of California Cities (Dinner); Chocolate	T IZZa (Gillounas Gire)

### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

### STATEMENT OF ECONOMIC INTERESTS

#### COVER PAGE .

A Public Document

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riease type or print in this		(ANDD) E)	DAYTIME TELEPHONE NUMBER
NAME (LAST)	(FIRST)	(MIDDLE)	DATTIME TELEFRONE NUMBER
MACHISIC, John	• • • • • • • • • • • • • • • • • • • •		( 951 ) 845-8343
MAILING ADDRESS STREET (May use business address)	CITY	STATE ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS
5384 Plain Field Dr., Banning, CA 92220			
1. Office, Agency, or Court		4. Schedule Summa	ary
Name of Office, Agency, or Court:		→ Total number of pages	
Riverside County		including this cover pa	ge:
Division, Board, District, if applicable:		→ Check applicable sched	dules or "No reportable
Indian Gaming Local Benefit Committe	<b>)e</b>	interests."	
Your Position:		I have disclosed interests attached schedules:	s on one or more of the
Committee Member		Schedule A-1  Yes -	- schedule attached
→ If filing for multiple positions, list addition	ional agency(ies)/	Investments (Less than 10% O	wnership)
position(s): (Attach a separate sheet  Agency:		Schedule A-2 Yes -	
Agency.		Schedule B Yes -	- schedule attached
Position:		Real Property	- Solicatio attached
		Schedule C Yes -	- schedule attached Positions (Income Other than Gifts
2. Jurisdiction of Office (Check a	at least one box)	and Travel Payments)	
State		_	- schedule attached
☑ County of RIVERSIDE		Income – Gifts	
☐ City of			- schedule attached
☐ Multi-County		Income – Travel Payments	
☐ Other		-c	)r-
		No reportable interest	ts on any schedule
3. Type of Statement (Check at le	east one box)		
Assuming Office/Initial Date:		5. Verification	
Annual: The period covered is Januar	ry 1, 2007,		ole diligence in preparing this
through December 31, 2007.		statement. I have reviewed	this statement and to the best of
-or-		my knowledge the information	tion contained herein and in any
O The period covered is/	, through	attached schedules is true	and complete.
, -		I certify under penalty of pe	erjury under the laws of the State
Leaving Office Date Left:/ (Check one)		of California that the fore	going is true and correct.
O The period covered is January 1, 2 date of leaving office.	007, through the	Date Signed $\frac{Z}{z}$	9/08
date of leaving office.	1	Date Signed	(nonth, day, year)
- '	, through	$\bigcirc$	ullane
the date of leaving office.	-	Signature(File the originally	signed statement with your filling official.)
☐ Candidate			EDDC Form 700 (2007/200

mailed 3/13/08

FPPC Form 700 (2007/2008) EDDC Tall Eron Halalina BERIASK EDDC

DAYTIME TELEPHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

(951) 845-8343

## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

### STATEMENT OF ECONOMIC INTERESTS

#### COVER PAGE .

A Public Document

(MIDDLE)

STATE

ZIP CODE

Please type or print in ink.

NAME (LAST)	(FIRST)
*** O. 11010 John	•
MACHISIC, John MAILING ADDRESS STREET	CITY
(May use business address)	220
5384 Plain Field Dr., Banning, CA 922	220
1. Office, Agency, or Court	
Name of Office, Agency, or Court:	
Western Riverside Co. Regional Co	nservation Author.
Division, Board, District, if applicable:	
Your Position:	·
Board Member	
→ If filing for multiple positions, list ac position(s): (Attach a separate she	dditional agency(ies)/ eet if necessary.)
Agency:	
Position:	
2. Jurisdiction of Office (Che	ck at least one hox)
	ch at least one boxy
☐ State  ☑ County of RIVERSIDE	
City of	
· · · · · · · · · · · · · · · · · · ·	
Multi-County	
Other	
3. Type of Statement (Check	at least one box)
	1
Assuming Office/Initial Date:	i
Annual: The period covered is Jai through December 31, 2007.	nuary 1, 2007,
-or-	/ through
O The period covered is/ December 31, 2007.	/, through
Leaving Office Date Left:/_ (Check one)	
O The period covered is January date of leaving office.	1, 2007, through the
-or-	, Marana
O The period covered is/ the date of leaving office.	, through
☐ Candidate	

4. Schedule Summary			
→ Total number of pages including this cover page:2			
→ Check applicable schedules or "No reportable interests."			
I have disclosed interests on one or more of the attached schedules:			
Schedule A-1  Yes – schedule attached  Investments (Less than 10% Ownership)			
Schedule A-2  Yes – schedule attached Investments (10% or greater Ownership)			
Schedule B			
Schedule C Yes — schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)			
Schedule D			
Schedule E			
-or-			
No reportable interests on any schedule			

#### 5. Verification

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

**Date Signed** 

 $-\omega_l$ 

Signature \_

marken ...

originally signed statement with your filing official.)

FPPC Form 700 (2007/2008) FPPC Toll-Free Helpline: 866/ASK-FPPC

mariis /13/08

## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE .

A Public Document

Please type or print in ink.

Candidate

Frease type or print in					
NAME (LAST)	(FII	RST)	(MIDDL	E)	DAYTIME TELEPHONE NUMBER
MACHICIC John		•			( 951 ) 845-8343
MACHISIC, John MAILING ADDRESS (May use business addre	STREET	CITY	STATE	ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS
5004 Dieis Field D	r Banning CA 92220				

MACHISIC, John	200	STATE ZIP CODE
MAILING ADDRESS STREET (May use business address)	CITY	OIAIL ZII OOL
5384 Plain Field Dr., Banning, C	A 92220	
0001.1.0		
1. Office, Agency, or Co	urt	4. Schedule Summary
Name of Office, Agency, or Cour	t:	Total number of pages
Western Riverside Council of	Governments (WRCOG)	including this cover page:
Division, Board, District, if applica		→ Check applicable schedule interests."
Your Position:		I have disclosed interests of attached schedules:
Board Member	·	Schedule A-1 Yes - so
→ If filing for multiple positions, position(s): (Attach a separa	list additional agency(ies)/ ate sheet if necessary.)	Investments (Less than 10% Owner
Agency:	·	Schedule A-2  Yes - so Investments (10% or greater Owner
Position:		Schedule B Yes - so Real Property
		Schedule C Yes - so Income, Loans, & Business Po
2. Jurisdiction of Office	(Crieck at least one box)	and Travel Payments)
State PIVERSIDE		Schedule D X Yes – so Income – Gifts
MI County of		
City of		Schedule E Yes – so Income – Travel Payments
☐ Multi-County		-or-
Other		
		No reportable interests of
3. Type of Statement (C	theck at least one box)	
☐ Assuming Office/Initial	Date:/	5. Verification
Annual: The period covered through December 31, 2007.	is January 1, 2007,	I have used all reasonable statement. I have reviewed thi
-or-		my knowledge the information
O The period covered is December 31, 2007.	, through	attached schedules is true an
Leaving Office Date Left: _ (Check one)		of California that the forego
O The period covered is January date of leaving office.	·	Date Signed 2 20
O The period covered is — the date of leaving office.	, through	Signature
i		<i>i</i> /

4. Schedule Summary		
→ Total number of pages including this cover page:2		
➡ Check applicable schedules or "No reportable interests."		
I have disclosed interests on one or more of the attached schedules:		
Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)		
Schedule A-2 Yes – schedule attached Investments (10% or greater Ownership)		
Schedule B Yes – schedule attached  Real Property		
Schedule C Yes — schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)		
Schedule D X Yes – schedule attached Income – Gifts		
Schedule E Yes – schedule attached Income – Travel Payments		
-or-		
No reportable interests on any schedule		

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

statement with your filing official.)

FPPC Form 700 (2007/2008) FPPC Toll-Free Helpline: 866/ASK-FPPC

## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received Full Official Use Only

MAR 1 0 2009

B Caly Club's Office

DAYTIME TELEPHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

(951)845-8343

A Public Document

(MIDDLE)

ZIP CODE

STATE

Please type or print in ink.	Аги
NAME (LAST)	(FIRST)
MACHISIC	John
MAILING ADDRESS STREET (May use business address)	CITY
5384 Plain Field Dr.	Banning
4 Office Agency or Court	
1. Office, Agency, or Court  Name of Office, Agency, or Court:	
City Council  Division, Board, District, if applicable:	
Division, Board, Biomod, a Epperation	
Your Position:	
Council Member	
➤ If filing for multiple positions, list addition position(s): (Attach a separate sheet)	tional agency(ies)/ et if necessary.)
Agency:	
	· 1
Position:	
2. Jurisdiction of Office (Chec	k at least one box)
☐ State	
County of	
☑ City of <u>Banning</u>	
☐ Multi-County	
Other	·
3. Type of Statement (Check a	it least one box)
☐ Assuming Office/Initial Date: _	
Annual: The period covered is Januthrough December 31, 2008.	uary 1, 2008,
-or-	
O The period covered is/ December 31, 2008.	_/, through
Leaving Office Date Left:/ (Check one)	
O The period covered is January 1 date of leaving office.	, 2008, through the
-or-	
O The period covered is/ the date of leaving office.	_/, through
Candidate Election Year:	

CA 92220
4. Schedule Summary
➤ Total number of pages including this cover page:
Check applicable schedules or "No reportable interests."
I have disclosed interests on one or more of the attached schedules:
Schedule A-1. Yes – schedule attached Investments (Less than 10% Ownership)
Schedule A-2 Yes — schedule attached Investments (10% or greater Ownership)
Schedule B Yes – schedule attached  Real Property
Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
Schedule D Yes – schedule attached Income – Gifts
Schedule E Yes – schedule attached  Income – Gifts – Travel Payments
-or-
No reportable interests on any schedule
5. Verification
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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date Signed 3/9/(month, day, year)

FPPC Form 700 (2008/2009)

nt with your filing official.)

FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov

Signature

### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Election Year: .

☐ Candidate

### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A Public Document

Please type or print in ink.		(MIDDLE)	DAYTIME TELEPHONE NUMBER
NAME (LAST)	(FIRST)	(MIDDLE)	
MACHISIC	John	STATE ZIP CODE	( 951 ) 845-8343 OPTIONAL: FAX / E-MAIL ADDRESS
MAILING ADDRESS STREET (May use business address)	CITY	STATE ZIP CODE	OPTIONAL, PAX / L-MINIE ADDITION
5384 Plain Field Dr.	Banning	CA 92220	
1. Office, Agency, or Court		4. Schedule Sumn	nary
Name of Office, Agency, or Court:		► Total number of page including this cover p	s 1
City Council			
Division, Board, District, if applicable	<b>)</b> :	interests."	edules or "No reportable
Your Position:	,	I have disclosed intere attached schedules:	sts on one or more of the
Council Member		Schedule A-1  Yes	- schedule attached
▶ If filing for multiple positions, list a position(s): (Attach a separate s	additional agency(ies)/ sheet if necessary.)	Investments (Less than 10%	Ownership)
Agency: Indian Gaming Local Ber		Schedule A-2 Yes	
Position: Member	· .	Schedule B	- schedule attached
2. Jurisdiction of Office (CI	heck at least one box)		- schedule attached ss Positions (Income Other than Gifts
☐ State		• _	- schedule attached
County of		Income – Gifts	
☐ County or	· · · · · · · · · · · · · · · · · · ·	Schedule E Yes	- schedule attached
Multi-County		Income – Gifts – Travel F	Payments
☐ Other ————			-or-
U Otner		No reportable interes	ests on any schedule
3. Type of Statement (Check	ck at least one box)		
Assuming Office/Initial Date	e:/	5. Verification	
Annual: The period covered is through December 31, 2008.	January 1, 2008,	statement. I have review	able diligence in preparing this wed this statement and to the best mation contained herein and in any
O The period covered is/_ December 31, 2008.	, through	attached schedules is tru	e and complete.
Leaving Office Date Left: (Check one)	<i></i>	I certify under penalty of of California that the fo	perjury under the laws of the State regoing is true and correct.
O The period covered is Januar date of leaving office.	ry 1, 2008, through the	Date Signed 3/9	(month, day, year)
O The period covered is/_ the date of leaving office.	, through	Signature (File Inc. Artificia	All signed statement with your filing official.)

FPPC Form 700 (2008/2009)

FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov

### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

### STATEMENT OF ECONOMIC INTERESTS

### **COVER PAGE**

A Public Document

Please type or print in ink.

☐ Candidate

Election Year: .

NAME (LAST)	(FIRST)	(MIDD	LE)	DAYTIME TELEPHONE NUMBER
	John			( 951 ) 845-8343
MACHISIC  MAILING ADDRESS STREET	CITY	STATE	ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS
(May use business address)			00000	
5384 Plain Field Dr.	Banning	CA	92220	
1. Office, Agency, or Cou	rt	4. Schedu	le Summa	ry
Name of Office, Agency, or Court:		► Total numl	per of pages	1
City Council		including 1	this cover pages	je:
Division, Board, District, if applicab	ole:	► Check app	licable schedu	les or "No reportable
Division, Board, Diemed, " Springer		interests."		
Your Position:		I have disc attached so		on one or more of the
Council Member				schedule attached
▶ If filing for multiple positions, list	t additional agency(ies)/	Investments	(Less than 10% Ow	inership)
position(s): (Attach a separate				schedule attached
Agency: Western Riverside cour	ncil of Governments	Investments	(10% or greater Ov	nership)
		Schedule E	_	schedule attached
Position: Member		Real Proper	by .	
		Schedule C		schedule attached Positions (Income Other than Gifts
2. Jurisdiction of Office	Check at least one box)	Income, Loa and Travel Pay	ns, & Business ments)	POSIDONS (Income Other than Oils
☐ State		Schedule I	)	schedule attached
County of	·	Income - G	fits	
☑ City of Banning				schedule attached
Multi-County		Income – G	ifts – Travel Pay	ments
Other			-0	<b>r-</b>
Outer		⊠ No repo	ntable interests	s on any schedule
3. Type of Statement (Che	eck at least one box)			
	ate:/	E >4161	·!	
		5. Verifica		
Annual: The period covered is through December 31, 2008.	; January 1, 2006,	I have used	all reasonab	le diligence in preparing this I this statement and to the best
-or-	-	of my knowled	nave reviewed doe the information	ation contained herein and in any
O The period covered is	, through	attached sche	edules is true	and complete.
December 31, 2008.		Leertifyunde	r nenalty of pe	rjury under the laws of the State
Leaving Office Date Left:		of California	that the fore	going is true and correct.
(Check one)			/	/
O The period covered is Janua	ary 1, 2008, through the	Duk Simon	3/9	109
date of leaving office.		Date Signed		(month, day, year)
-or-	, through		( )n.	
O The period covered is the date of leaving office.		Signature _	(File the originally	igned statement with your filing official.)

FPPC Form 700 (2008/2009)

FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov

DAYTIME TELEPHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

(951)845-8343

### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A Public Document

(MIDDLE)

STATE

CA

**Date Signed** 

Signature

ZIP CODE

92220

4. Schedule Summary

Please type or print in ink.	(5)007
NAME (LAST)	(FIRST)
MACHISIC	John
MAILING ADDRESS STREET May use business address)	CITY
5384 Plain Field Dr.	Banning
5364 Flair Floid D.	
1. Office, Agency, or Court	
Name of Office, Agency, or Court:	
City Council	
Division, Board, District, if applicable:	
Your Position:	
Council Member	
▶ If filing for multiple positions, list a position(s): (Attach a separate s	neet if necessary.)
Agency: Regional Conservation A	uthority
Position: Member	
2. Jurisdiction of Office (Ch	pack at least one box)
	een at icust one zony
☐ State	
County of	
☑ City of <u>Banning</u>	
Multi-County	
☐ Other	
3. Type of Statement (Check	k at least one box)
☐ Assuming Office/Initial Date	:
Annual: The period covered is J through December 31, 2008.	anuary 1, 2008,
-or-	
O The period covered is	, through
Leaving Office Date Left:	
O The period covered is January date of leaving office.	y 1, 2008, through the
-or-	
O The period covered is	/, through
Candidate Election Year:	

➤ Total number of pages including this cover page:		
<ul> <li>Check applicable schedules or "No reportable interests."</li> <li>I have disclosed interests on one or more of the attached schedules:</li> </ul>		
Schedule A-1 Yes — schedule attached Investments (Less than 10% Ownership)		
Schedule A-2  Yes – schedule attached Investments (10% or greater Ownership)		
Schedule B		
Schedule C Yes — schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)		
Schedule D Yes – schedule attached Income – Gifts		
Schedule E Yes – schedule attached  Income – Gifts – Travel Payments		
-or-		
No reportable interests on any schedule		
5. Verification		
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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		

FPPC Form 700 (2008/2009)

FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov