## 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) (FIRST	T) (MIDDLE)
Woods Car	rla Navarro
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
City of Costa Mesa	
Division, Board, Department, District, if applicable	Your Position
Planning Commission	Commissioner
▶ If filing for multiple positions, list below or on an attachment. (	
Agency:	The state of the s
2. Jurisdiction of Office (Check at least one box)	
∵ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	
☑ City of Costa Mesa	
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2016, through	Leaving Office: Date Left/
December 31, 2016.	(Check one)
The period covered is/	leaving office.
Assuming Office: Date assumed 2,7,17	
Candidate: Election year and office	sought, if different than Part 1:
4. Schedule Summary (must complete) ► Total I	number of pages including this cover page:1
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	
5. Verification	
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY STATE ZIP CODE
	osta Mesa CA 92626
(714) 754-5165	e-mail address C-woods @ costamesaca.gov
I have used all reasonable diligence in preparing this statement. I have herein and in any attached schedules is true and complete. I ackn	ave reviewed this statement and to the best of my knowledge the information contained lowledge this is a public document.
I certify under penalty of perjury under the laws of the State of	f California that the foregoing is true and correct.
Date Signed 3 17 17	Signature
(month, day, year)	(File the originally signed statement with your filing official.)