CALIFORNIA FORM 7)(
FAIR POLITICAL PRACTICES COMM	ISS	ON

(month, day, year)

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received Filing Official Use Only

A PUBLIC DOCUMENT

Filed Date: 03/30/2021 04:08 PM SAN: FPPC

Please type or print in ink.	SAN: FPPC
NAME OF FILER (LAST) (FIRST)	(MIDDLE)
	(אוטטעב)
de Arakal Byron	
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
City of Costa Mesa	
Division, Board, Department, District, if applicable	Your Position
	Planning Commissioner
► If filing for multiple positions, list below or on an attachment. (Do not	
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
State	Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
	(Statewide Jurisdiction)
Multi-County	County of
▼ City of Costa Mesa	Other
3. Type of Statement (Check at least one box)	
X Annual: The period covered is January 1, 2020, through	Leaving Office: Date Left///
December 31, 2020 . - or -	(Check one circle.)
The period covered is/, through	igh O The period covered is January 1, 2020 , through the date of
December 31, 2020 .	leaving office. -or-
Assuming Office: Date assumed//	○ The period covered is/, through the data of leaving office.
	the date of leaving office.
Candidate: Date of Election and office so	ught, if different than Part 1:
4. Schedule Summary (must complete) ► Total num	ber of pages including this cover page: 2
Schedules attached	ber of pages including this cover page:
Schedules allached	
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 - <i>Real Property</i> – schedule attached	Schedule E - Income – Gifts – Travel Payments – schedule attached
-or- D None - No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS STREET CIT (Business or Agency Address Recommended - Public Document)	Y STATE ZIP CODE
	sta Mesa CA 92626
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS
(714)754-5165	
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 acknowle	edge this is a public document.
I certify under penalty of perjury under the laws of the State of Ca	lifornia that the foregoing is true and correct.
Date Signed 03/30/2021 04:08 PM	Signature Electronic Submission

(File the originally signed paper statement with your filing official.)

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

Byron de Arakal

(Ownership Interest is 10% or Greater)

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Byron de Arakal	
Name	Name
2816 Drake Avenue, Costa Mesa, CA 92626 Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Land Use and Entitlement Consulting	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
□ ^{\$0} - ^{\$1,999}	\$0 - \$1,999
\$2,000 - \$10,000 20 20 \$10,001 - \$100,000 ACQUIRED DISPOSED	\$2,000 - \$10,000 20 20 \$10,001 - \$100,000 ACQUIRED DISPOSED
\$100,001 - \$1,000,000	\$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
Partnership X Sole Proprietorship Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Owner	YOUR BUSINESS POSITION
 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> 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	\$0 - \$499 \$10,001 - \$100,000
S500 - \$1,000 X OVER \$100,000	S500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000	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.)	► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
None or X Names listed below	None or Names listed below
TRC Retail	
 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST 	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
INVESTMENT REAL PROPERTY	
Name of Business Entity, if Investment, <u>or</u>	Name of Business Entity, if Investment, <u>or</u>
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
Description of Dusinger Activity of	Description of Ducineses Astritus or
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
\$10,001 - \$1,000,000	\$10,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property	Check box if additional schedules reporting investments or real property
are attached	are attached
	-