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2011 APR -1 PM 3:18

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Righeimer James CITY OF COSTA MESA

**1. Office, Agency, or Court**

Agency Name  
City of Costa Mesa  
Division, Board, Department, District, if applicable  
City Council  
Your Position  
Councilman

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

- State
- Multi-County \_\_\_\_\_
- City of Costa Mesa
- Judge (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

- Annual:** The period covered is January 1, 2010, through December 31, 2010.  
-or-  
The period covered is \_\_\_\_\_ through December 31, 2010.
- Assuming Office:** Date \_\_\_\_\_
- Candidate:** Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_
- Leaving Office:** Date Left \_\_\_\_\_  
(Check one)
  - The period covered is January 1, 2010, through the date of leaving office.
  - The period covered is \_\_\_\_\_ through the date of leaving office.

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 7

- Schedule A-1 - Investments** - schedule attached
- Schedule A-2 - Investments** - schedule attached
- Schedule B - Real Property** - schedule attached
- Schedule C - Income, Loans, & Business Positions** - schedule attached
- Schedule D - Income - Gifts** - schedule attached
- Schedule E - Income - Gifts - Travel Payments** - schedule attached

-or-

**None - No reportable interests on any schedule**

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
77 Fair Drive Costa Mesa CA 92628  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
( )

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 03/31/2011 Signature \_\_\_\_\_  
(month, day, year)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name

James Righelmer

NAME OF BUSINESS ENTITY  
**Citibank**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Bank**

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10    03 / 10 / 10  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY  
**Morgan Stanley**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Bank**

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10    03 / 10 / 10  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY  
**First Community Bank**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Local Bank**

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10    \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY  
**Starbucks**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Coffee**

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10    03 / 10 / 10  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY  
**Greenglass Associates**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Medical Office Building**

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other **5% Ownership** \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10    \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                                  DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10    \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                                  DISPOSED

Comments:

SCHEDULE A-2

Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

Name
James Rigueimer

1. BUSINESS ENTITY OR TRUST
FV Showroom Partners I, LLC
Name
4040 MacArthur Blvd., #250, Newport Beach, CA 92660
Address (Business Address Acceptable)
Check one
[ ] Trust, go to 2 [x] Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retail Center
FAIR MARKET VALUE
[ ] \$2,000 - \$10,000
[ ] \$10,001 - \$100,000
[ ] \$100,001 - \$1,000,000
[x] Over \$1,000,000
IF APPLICABLE, LIST DATE:
/ / 10 / 10
ACQUIRED DISPOSED
NATURE OF INVESTMENT
[ ] Sole Proprietorship [x] Partnership [ ] Other
YOUR BUSINESS POSITION

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
[ ] \$500 - \$1,000 [x] OVER \$100,000
[ ] \$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)

Bassett Furniture, Home Expressions, 4Day Furniture, Coffee Bean, Dippin Dots, Zpizza, Quiznos, Pho99, All Brand Windows, Pita Fresh, Panda Express, Patio World, Ortho Mattress

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
[ ] INVESTMENT [x] REAL PROPERTY.
Retail Center
Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property
18010, 11, 30, 90, 93 Newhope, Fountain Valley, CA
Description of Business Activity or
City or Other Precise Location of Real Property
FAIR MARKET VALUE
[ ] \$2,000 - \$10,000
[ ] \$10,001 - \$100,000
[ ] \$100,001 - \$1,000,000
[x] Over \$1,000,000
IF APPLICABLE, LIST DATE:
/ / 10 / 10
ACQUIRED DISPOSED
NATURE OF INTEREST
[ ] Property Ownership/Deed of Trust [ ] Stock [x] Partnership
[ ] Leasehold Yrs. remaining [ ] Other
[ ] Check box if additional schedules reporting investments or real property are attached

Comments:

1. BUSINESS ENTITY OR TRUST
LMC Management Group, LLC
Name
4040 MacArthur Blvd., #250, Newport Beach, CA 92660
Address (Business Address Acceptable)
Check one
[ ] Trust, go to 2 [x] Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Asset Management
FAIR MARKET VALUE
[ ] \$2,000 - \$10,000
[ ] \$10,001 - \$100,000
[x] \$100,001 - \$1,000,000
[ ] Over \$1,000,000
IF APPLICABLE, LIST DATE:
/ / 10 / 10
ACQUIRED DISPOSED
NATURE OF INVESTMENT
[ ] Sole Proprietorship [x] Partnership [ ] Other
YOUR BUSINESS POSITION

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
[ ] \$500 - \$1,000 [x] OVER \$100,000
[ ] \$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)

FV Showroom Partners, Greenglass Assoc, Verizon, Sprint, AT&T, T-Mobile, Marketplace at Weston Ranch, LLC, Metro PCS

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
[ ] INVESTMENT [ ] REAL PROPERTY
Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity or
City or Other Precise Location of Real Property
FAIR MARKET VALUE
[ ] \$2,000 - \$10,000
[ ] \$10,001 - \$100,000
[ ] \$100,001 - \$1,000,000
[ ] Over \$1,000,000
IF APPLICABLE, LIST DATE:
/ / 10 / 10
ACQUIRED DISPOSED
NATURE OF INTEREST
[ ] Property Ownership/Deed of Trust [ ] Stock [ ] Partnership
[ ] Leasehold Yrs. remaining [ ] Other
[ ] Check box if additional schedules reporting investments or real property are attached

**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  
James Righheimer

**1. BUSINESS ENTITY OR TRUST**

National Medical Wireless Broadband Alliance

Name  
4040 MacArthur Blvd., #250, Newport Beach, CA 92660

Address (Business Address Acceptable)

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

Wireless Alliance

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000                             /        / 10                      01 / 10 / 10  
 \$100,001 - \$1,000,000                      ACQUIRED                      DISPOSED  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Sole Proprietorship     Partnership     \_\_\_\_\_  
Other

YOUR BUSINESS POSITION \_\_\_\_\_

**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  
 \$500 - \$1,000                       OVER \$100,000  
 \$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)**

Kaiser, Choc, Catholic Health Care West

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT                       REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000                             /        / 10                             /        / 10  
 \$100,001 - \$1,000,000                      ACQUIRED                      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_                       Other \_\_\_\_\_  
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

**1. BUSINESS ENTITY OR TRUST**

SCJR Master Commercial Agreement

Name  
4040 MacArthur Blvd., #250, Newport Beach, CA 92660

Address (Business Address Acceptable)

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

Develop Commercial Centers

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000                             /        / 10                             /        / 10  
 \$100,001 - \$1,000,000                      ACQUIRED                      DISPOSED  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Sole Proprietorship     Partnership     \_\_\_\_\_  
Other

YOUR BUSINESS POSITION \_\_\_\_\_

**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  
 \$500 - \$1,000                       OVER \$100,000  
 \$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)**

None

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT                       REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000                             /        / 10                             /        / 10  
 \$100,001 - \$1,000,000                      ACQUIRED                      DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_                       Other \_\_\_\_\_  
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name  James Rigeimer
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**▶ 1. BUSINESS ENTITY OR TRUST**

**Stanford Triangle Partners, LLC**  
 Name  
 4040 MacArthur Blvd., #250, Newport Beach, CA 92660  
 Address (Business Address Acceptable)  
 Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
<b>Vacant Land</b>	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/10    ____/____/10
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED    DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Sole Proprietorship	<input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Other
YOUR BUSINESS POSITION _____	

**▶ 1. BUSINESS ENTITY OR TRUST**

**Arbor Capital Group, LLC**  
 Name  
 4040 MacArthur Blvd., #250, Newport Beach, CA 92660  
 Address (Business Address Acceptable)  
 Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
<b>Real Estate Finance</b>	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/10    ____/____/10
<input checked="" type="checkbox"/> \$10,001 - \$100,000	04/10/10    ____/____/10
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED    DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Sole Proprietorship	<input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Other
YOUR BUSINESS POSITION _____	

**▶ 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  
 \$500 - \$1,000     OVER \$100,000  
 \$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)**

\_\_\_\_\_

\_\_\_\_\_

**▶ 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  
 \$500 - \$1,000     OVER \$100,000  
 \$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)**

**Reservoir Distribution LLC**

\_\_\_\_\_

\_\_\_\_\_

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT     REAL PROPERTY

**12711-31 Brookhurst Ave.**  
 Name of Business Entity or  
 Street Address or Assessor's Parcel Number of Real Property  
**Garden Grove, CA**

Description of Business Activity or  
 City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/10    ____/____/10
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED    DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input type="checkbox"/> Property Ownership/Deed of Trust	<input type="checkbox"/> Stock <input checked="" type="checkbox"/> Partnership
<input type="checkbox"/> Leasehold _____	<input type="checkbox"/> Other _____
Yrs. remaining	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT     REAL PROPERTY

\_\_\_\_\_  
 Name of Business Entity or  
 Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or  
 City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	____/____/10    ____/____/10
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED    DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input type="checkbox"/> Property Ownership/Deed of Trust	<input type="checkbox"/> Stock <input type="checkbox"/> Partnership
<input type="checkbox"/> Leasehold _____	<input type="checkbox"/> Other _____
Yrs. remaining	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

Comments: \_\_\_\_\_

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

Name  
James Righaimer

STREET ADDRESS OR PRECISE LOCATION \_\_\_\_\_

CITY  
Costa Mesa

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000 10 / 10  
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold 28  \_\_\_\_\_  
 Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$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 income of \$10,000 or more.  
Verizon, T-Mobile, Metro PCS

STREET ADDRESS OR PRECISE LOCATION \_\_\_\_\_

CITY \_\_\_\_\_

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000 10 / 10  
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED  
 Over \$1,000,000

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_  \_\_\_\_\_  
 Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$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 income of \$10,000 or more.  
 \_\_\_\_\_

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ TERM (Months/Years) \_\_\_\_\_  
 %  None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ TERM (Months/Years) \_\_\_\_\_  
 %  None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
James Righeimer

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
SunCal Companies

ADDRESS (Business Address Acceptable)  
2392 Morse Ave., Irvine, CA 92614

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Commercial Development

YOUR BUSINESS POSITION  
President, Commercial Division

GROSS INCOME RECEIVED  
 \$500 - \$1,000     \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
*(Property, car, boat, etc.)*  
 Commission or     Rental Income, list each source of \$10,000 or more

Other Travel & Lodging for R.E. Developments  
*(Describe)*

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED  
 \$500 - \$1,000     \$1,001 - \$10,000  
 \$10,001 - \$100,000     OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary     Spouse's or registered domestic partner's income  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
*(Property, car, boat, etc.)*  
 Commission or     Rental Income, list each source of \$10,000 or more

Other \_\_\_\_\_  
*(Describe)*

**2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  
 \$1,001 - \$10,000  
 \$10,001 - \$100,000  
 OVER \$100,000

INTEREST RATE \_\_\_\_\_%     None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN  
 None     Personal residence  
 Real Property \_\_\_\_\_  
*Street address* \_\_\_\_\_  
*City* \_\_\_\_\_  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
*(Describe)*

Comments: \_\_\_\_\_