

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

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lease type or print in ink.	_		City of i	Clerk's Off
ME OF FILER (LAST)	(FIRST)	(M	DDLE)	- 'd beach
arcia	Michael	С	hristopher	
Office, Agency, or Court				
Agency Name (Do not use acronyms)			<u> </u>	
City of Laguna Beach				
Division, Board, Department, District, it	applicable	Your Position		
Fire Department		Fire Chief		
► If filing for multiple positions, list be	low or on an attachment. (Do not	use acronyms)		
Agency:		Position:		<u> </u>
. Jurisdiction of Office (Check	c at least one box)			
☐ State		Judge, Retired Judge, Pr (Statewide Jurisdiction)	ro Tem Judge, or Court Cor	nmissioner
Multi-County		County of		
City of Laguna Beach		Other		
3. Type of Statement (Check at	least one box)			
Annual: The period covered is December 31, 2020.		Leaving Office: Date (Left// Check one circle.)	
-or- The period covered is a December 31, 2020.	01 <u>,01 ,2021</u> , througi	The period covered leaving office.	is January 1, 2020, through	h the date of
Assuming Office: Date assume	d		is/ office.	, through
Candidate: Date of Election	and office sou	ght, if different than Part 1:		
I. Schedule Summary (must	complete) ► Total numb	er of pages including this co	over page: 1	
Schedules attached				
Schedule A-1 - Investments -	- schodule attached	Schedule C - Income, Loans, &	& Business Positions – sche	edule attached
Schedule A-2 - Investments -		Schedule D - Income - Gifts -	schedule attached	
Schedule B - Real Property -		☐ Schedule E - Income - Gifts -	Travel Payments - schedul	le attached
L				
-or- 🔳 None - No reportable i	interests on any schedule			
5. Verification				
MAILING ADDRESS STREET (Business or Agency Address Recommended -	CITY Public Document	ST	ATE ZIP CODE	
505 Forest Ave.	Lag	una Beach C/	φ 9265	1
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
(949) 497-0700		mgarcia@lagunabeacho	ity.net	4
I have used all reasonable diligence in herein and in any attached schedules	n preparing this statement. I have resist rue and complete. I acknowled	eviewed this statement and to the besige this is a public document.	et of my knowledge the infor	mation containe
I certify under penalty of perjury u	nder the laws of the State of Cali	fornia that the foregoing is true ar	nd correct.	
Date Signed March 24, 2021		Signature	16-	
Date Signed (month day)	(serve)		med paper statement with your filing of	ficial.)