CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received Official Use Only FEB 0 7 2017
City Clerk's Office

Please type or print in ink.

NAN	ME OF FILER (LAST)	(FIRST)		G.	(MIDDLE)		
H	ALLETT	RYAN			MATTHEW		
1.	Office, Agency, or Court	fice, Agency, or Court					
	Agency Name (Do not use acronyms)						
	CITY OF LAGUNA BEACH						
	Division, Board, Department, District, if applica	ble	Your Position	on			
	CITY MANAGER'S OFFICE		ADMINI	STRATIVE ANAL	YST		
	▶ If filing for multiple positions, list below or c	ng for multiple positions, list below or on an attachment. (Do not use acronyms)					
	Agency:		Position: _				
2.	Jurisdiction of Office (Check at leas	t one box)	Angeline Control of State Control of Sta				
	State		☐ Judge or	Court Commissioner (S	Statewide Jurisdiction)		
	Multi-County		3				
	☑ City of LAGUNA BEACH		Other				
3	City of		Other		-		
3.	Type of Statement (Check at least on	e box)		¥	<i>i</i> 5.		
	Annual: The period covered is January 1 December 31, 2016.	, 2016, through	Leaving (Check of				
	The period covered is/_ December 31, 2016.	, through	1770	period covered is Janua ng office.	ary 1, 2016, through the date of		
Assuming Office: Date assumed/		The period covered is/, through the date of leaving office.					
	Candidate: Election year	and office sought, if	different than Part	1:			
4.	Schedule Summary (must compl	ete) ► Total number	of pages inclu	ding this cover pa	age:		
	Schedules attached						
	Schedule A-1 - Investments – schedul						
	Schedule A-2 - Investments – schedul	20-0-354-20-36-30-30-30-30-30-	 ☐ Schedule C - Income, Loans, & Business Positions – schedule attached ☐ Schedule D - Income – Gifts – schedule attached 				
	Schedule B - Real Property - schedul	e attached	Schedule E - Inc	ome – Gifts – Travel P	ayments - schedule attached		
- 55	-or-						
	✓ None - No reportable interests on any schedule						
5. `	Verification						
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docu	CITY ment)		STATE	ZIP CODE		
	505 FOREST AVENUE		A BEACH	CA	92651		
	DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS				
(949) 464-6673 RHALLETT@LAGUNABEA				LAGUNABEACH	CITY.NET		
	have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained nerein 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.						
	Data Signal 02/07/2017		• Constitute Participal				
	Date Signed(month, day, year)	S	ignature	(File the originally signed state	ment with your filing official.)		