CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

FEB 27 2018

COVER PAGE TO STATE OF THE PAG Please type or print in ink.

City Clerk's Office City of Laguna Beach, CA

NAME OF FILER (LAST)	(FIRST)	2010 APR -Z AHIU	(MIDDLE)
BOYD	KELLY	L AND T	H
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
> CITY OF LAGUNA BEACH			
Division, Board, Department, District, if applicable		Your Position	
		COUNCIL MEMBER	
▶ If filing for multiple positions, list below or on ar	n attachment. (Do not use	acronyms)	
Agency: LAGUNA BEACH CNTY WATE	R DISTRICT	Position: BOARD MEMBER	
2. Jurisdiction of Office (Check at least on	ne box)		
☐ State		☐ Judge or Court Commissioner (Statew	ride Jurisdiction)
Multi-County		County of	
☑ City of LAGUNA BEACH		➤ Other LBCWD+ PORTION OF	ORANGE COUNTY
3. Type of Statement (Check at least one be	ox)		
Annual: The period covered is January 1, 20 December 31, 2017.	17, through	Leaving Office: Date Left/ (Check one)	
The period covered is	J through	 The period covered is January 1, leaving office. 	2017, through the date of
Assuming Office: Date assumed/		O The period covered is/ the date of leaving office.	, through
Candidate: Date of Election	and office sought,	if different than Part 1:	
I. Schedule Summary (must complete) > Total number	of pages including this cover page:	4
Schedules attached	, , , , , , , , , , , , , , , , , , , ,	or bages moraumy amo octor bages	
Schedule A-1 - Investments - schedule att	ached T	Schadula C - Income I cane & Rusinass Po	eitione echadula attachad
Schedule A-2 - Investments - schedule att			
Schedule B - Real Property - schedule att		Schedule E - Income - Gifts - Travel Payme	
-or-			
☐ None - No reportable interests on an	y schedule		
5.			
nave used an reasonable diligence in preparing the herein and in any attached schedules is true and of		•	age the information contained
I certify under penalty of perjury under the laws	of the State of Californi	ia that the formacing is true and correct	
Date Signed 2-25-18	Si	gnature _	
(month, day, year)		growth Washington	sel)
			700 (2017/2018)

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
BOYD, KELLY H
<u> </u>

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
AMBRY GENETICS INC.	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENETICS	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 X Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
MAMIE OF BOSINESS ENTITY	NAME OF BOSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 17 / 17	
	ACQUIRED DISPOSED
, logolites Biol Golds	ACCUMED SIGNOCED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	☐ Stock ☐ Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 17 / 17	/ / 17 / 17
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	11
Comments:	

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
BOYD, KELLY H

▶ 1 BUSINESS ENTITY OR TRUST	▶ 1 BUSINESS ENTITY OR TRUST
AMBRY GENETICS INC.	
Name ALISO VIEJO, CA	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS GENETICS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 X Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship SHAREHOLDER Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION BOARD MEMBER	YOUR BUSINESS POSITION
► 2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	▶ 2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
S0 - \$499	\$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 and None or Names listed below	3 LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10 000 OR HORE and the participation of the second of the se
➤ 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST Check one box:	► 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or 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	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	\$1,000,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:_

SCHEDULE D Income - Gifts

► NAME OF SOURCE (Not an Acronym) LAGUNA FESTIVAL OF ARTS	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable) LAGUNA BEACH, CA	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
11 01 17 130 2 TICKETS	
► NAME OF SOURCE (Not an Acronym)	▶ NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
	\$
► NAME OF SOURCE (Not an Acronym)	▶ NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
s	\$
s	\$
s	s
Comments:	