

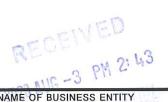
STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Ple	ease type or print in ink.			RECEIVED .	
NA	ME OF FILER (LAST)	(FIRST)			(MIDDLE)
B	ENNETT	STEVEN		2020 AUG - 3EUGENE: 43	
1.	Office, Agency, or Court			LITY OF WEST SMELLE	
	Agency Name (Do not use acronyms) WEST COVINA, CITY OF	(4)		CITA CTEVA 2 011 for	
	Division, Board, Department, District, if applic	able	Your	Position	
	CITY COUNCIL		CO	UNCIL MEMBER	
	▶ If filing for multiple positions, list below or	on an attachment. (Do n	ot use acronyms)		
	Agency:		Pos	ition:	
2.	Jurisdiction of Office (Check at lea	st one box)			
	☐ State			lge, Retired Judge, Pro Tem Judge, or Co atewide Jurisdiction)	urt Commissioner
	Multi-County		Co	unty of	
	✓ City of WEST COVINA				
3.	Type of Statement (Check at least of	one box)			
	Annual: The period covered is January December 31, 2019.	1, 2019, through	☐ Le	eaving Office: Date Left////	
	The period covered is	, throu	ugh O	The period covered is January 1, 2019, to leaving office.	hrough the date of
	Assuming Office: Date assumed			The period covered is/	, through
	✓ Candidate: Date of Election NOV. 3,	2020 and office so	ought, if different ti	han Part 1: CITY COUNCIL MEMBER	·
4.	Schedule Summary (must comp	lete) ► Total num	iber of pages	including this cover page:	
	Schedule A-1 - Investments - schedu	ule attached		C - Income, Loans, & Business Positions -	- schedule attached
	✓ Schedule A-2 - Investments – schedu	ile attached		D - Income - Gifts - schedule attached	
	Schedule B - Real Property - schedu	ile attached	☐ Schedule	E - Income - Gifts - Travel Payments - so	chedule attached
-(or- 🗆 None - No reportable interes	ts on any schedule			
5.	Verification	160			
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Doc	CIT'	Y	STATE ZIP	CODE
	1444 WEST GARVEY AVENUE, WEST	COVINA, CA 91790			
	DAYTIME TELEPHONE NUMBER		EMAIL ADDRE	88	
		. 190		RBENNETTWC@GMAIL.COM	
	I have used all reasonable diligence in prepar herein and in any attached schedules is true				information contained
	I certify under penalty of perjury under the	laws of the State of Ca	alifornia that the		
	Date Signed 8/2/2020		Cimatura		
	(month, day, year)		Signature		<i>(.</i>)

SCHEDULE A-1 Investments



Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

CALIFORNIA FORM	
Name	- , ,
STEVEN BENNETT	

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
CHARLES SCHWAB BANK	NONE
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
INVESTMENTS/BANK	
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 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT ☐ Stock	NATURE OF INVESTMENT Stock Other
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
C modifie received of Good of Male proposition constants by	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
SUNTRUST BANK	NONE
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
INVESTMENTS/BANK	
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 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock 7 Other 401k	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:
/	
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
NONE	NONE
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Ü	
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
\$2,000 - \$10,000 \$10,000 \$100,000 Over \$1,000,000	\$2,000 = \$10,000 \$110,000 \$10,000 \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
☐ Stock ☐ Other	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:
Comments: NONE	

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

2020 AUG (Ownership Interest is 10% or Greater)

CALIFORNIA FORM	700 COMMISSION
Name	
STEVEN BENNETT	

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
EMBROIDERYTECH (EMBROIDERYTECH.COM)	NONE
Name	Name
1219 EAST MARDINA ST., WEST COVINA, CA 91790	NONE
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 COMMERCIAL EMBROIDERY MACHINE REPAIR	GENERAL DESCRIPTION OF THIS BUSINESS NONE
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$\sigma \text{\$0 - \$1,999} \\ \ \ \$2,000 - \$10,000 \\ \ \ \$10,001 - \$100,000 \\ \ \ \$100,001 - \$1,000,000 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION OWNER/TECH	YOUR BUSINESS POSITION NONE
▶ 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 \$500 - \$1,000 OVER \$100,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below
NONE	NONE
NONE	
	5
	l I
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box: ☐ INVESTMENT ☐ REAL PROPERTY
☐ INVESTMENT ☐ REAL PROPERTY	NONE REAL PROPERTY
NONE Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property NONE	Assessor's Parcel Number or Street Address of Real Property NONE
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 / / 19 / / 19	\$2,000 - \$10,000 \$10,001 - \$100,000
\$10,001 - \$100,000	\$100,001 - \$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: NONE	FPPC Form 700 - Schedule A-2 (2019/20:

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

CALIFORNIA FORM	700 COMMISSION
Name	
STEVEN BENNETT	

	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
AMERICAN PROMOTIONAL EVENTS, INC	LOWE'S HOME IMPROVEMENT WHSE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
555 N. GILBERT ST., FULLERTON, CA 92833	ARROW HWY & BONITA AVE, SAN DIMAS, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
SALE OF FIREWORKS (SAFE AND SANE)	RETAIL
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
SALES/AREA MANAGER	CASHIER
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000\$1,001 - \$10,000
☐ \$10,001 - \$100,000	✓ \$10,001 - \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of(Real property, car, boat, etc.)
(Real property, car, boat, etc.)	(real property, car, boat, etc.) Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
SALARY + COMMISSION	
(Describe)	(Describe)
(Describe)	The basicand
(Describe)	(Describe)
Other(Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE	Other(Describe)
 Other	CDescribe) ERIOD lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's
 Other	CDescribe) ERIOD lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's
Other	Coescribe) ERIOD lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's status.
Other	Other (Describe) ERIOD lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's status. INTEREST RATE TERM (Months/Years)
Other	Other
Other	□ Other
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official seregular course of business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	Other
	Other
	□ Other
	Other
	Other
	Other