

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
*A Public Document*

 Date Initial Filing Received  
 Filing Official Use Only

1490081

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Jeffries, Kevin D			

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

Agency Name (Do not use acronyms) \_\_\_\_\_

COUNTY OF RIVERSIDE \_\_\_\_\_

Division, Board, Department, District, if applicable \_\_\_\_\_ Your Position \_\_\_\_\_

Board of Supervisors \_\_\_\_\_ Supervisor \_\_\_\_\_

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS \_\_\_\_\_ Position: \_\_\_\_\_

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

<input type="checkbox"/> State	<input type="checkbox"/> Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input checked="" type="checkbox"/> County of Riverside _____
<input type="checkbox"/> City of _____	<input type="checkbox"/> Other _____

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

<input checked="" type="checkbox"/> <b>Annual:</b> The period covered is January 1, 2022 through December 31, 2022. -or- The period covered is ____/____/____, through December 31, 2022. <input type="checkbox"/> <b>Assuming Office:</b> Date assumed ____/____/____ <input type="checkbox"/> <b>Candidate:</b> Date of Election _____ and office sought, if different than Part 1: _____	<input checked="" type="checkbox"/> <b>Leaving Office:</b> Date Left <u>01 / 10 / 2023</u> See attached (Check one circle) <input checked="" type="checkbox"/> The period covered is January 1, 2022 through the date of leaving office. <input type="checkbox"/> The period covered is ____/____/____, through the date of leaving office.
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**4. Schedule Summary (required)**► Total number of pages including this cover page: 18**Schedules attached**

<input checked="" type="checkbox"/> <b>Schedule A-1 - Investments</b> – schedule attached	<input checked="" type="checkbox"/> <b>Schedule C - Income, Loans, &amp; Business Positions</b> – schedule attached
<input checked="" type="checkbox"/> <b>Schedule A-2 - Investments</b> – schedule attached	<input type="checkbox"/> <b>Schedule D - Income – Gifts</b> – schedule attached
<input type="checkbox"/> <b>Schedule B - Real Property</b> – schedule attached	<input type="checkbox"/> <b>Schedule E - Income – Gifts – Travel Payments</b> – 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)				
4080 Lemon Street 5th Floor		Riverside	CA	92501
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS		
( 951 ) 955-1010		kjeffries@rivco.org		

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 02/01/2023  
 (month, day, year)

 Signature Kevin D Jeffries  
 (File the originally signed paper statement with your filing official.)



**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
**Expanded Statement Attachment**

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Kevin D Jeffries

\* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #
County of Riverside - COB	Southwest Communities Financing Authority	Alternate Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Flood Control & Water Conservation District	Commissioner	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Riverside County Library Foundation	Board of Directors	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside - COB	Solid Waste Management Advisory Council/Local Task	County Personnel	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Riverside County Asset Leasing Corporation (CORAL)	Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Housing Authority	Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Regional Park & Open-Space District	Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Waste Resources Management District	Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
Coachella Valley Association of Governments	Board	Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
Coachella Valley Conservation Commission	Commission	Commissioner	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
Riverside County Transportation Commission	Commission	Commissioner	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
Riverside Transit Agency	Board	board Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060

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**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name  
Kevin D Jeffries

\* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #
Western Riverside Council of Governments	Board	Board Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
Western Riverside County Regional Conservation Authority	Board	Board Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
Lake Elsinore San Jacinto Watershed Authority (LESJWA)	Board	Board Member	Leaving Office 1/10/2023	011400060-NFH-0060
Riverside County Local Agency Formation Commission	Commission	Commissioner	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
March Joint Powers Authority	Commission	Board Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Orange County Corridors Committee	Alternate member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
Riverside County Habitat Conservation Agency	Board	Alternate Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Riverside University Health System Medical Center	Board Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Temecula Valley Wine Country Enhanced Infrastructure Financing District Public Financing	Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County Of Riverside	Disaster Council	Member	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
COUNTY OF RIVERSIDE	Board of Supervisors	Supervisor	Annual 1/1/2022 - 12/31/2022	011400060-NFH-0060
County of Riverside	Highway 74 Enhanced Infrastructure Financing	Board Member	Annual 1/1/2022 - 12/31/2022	

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

*Investments must be itemized.**Do not attach brokerage or financial statements.***CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Jeffries, Kevin D

<p>▶ <b>NAME OF BUSINESS ENTITY</b> <u>Boston Scientific Corp</u></p> <p><b>GENERAL DESCRIPTION OF THIS BUSINESS</b> <u>Medical</u></p> <p><b>FAIR MARKET VALUE</b>  <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p><b>NATURE OF INVESTMENT</b>  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>22</u>      <u>      </u> / <u>      </u> / <u>22</u>          ACQUIRED                      DISPOSED         </p>	<p>▶ <b>NAME OF BUSINESS ENTITY</b> <u>Edison International</u></p> <p><b>GENERAL DESCRIPTION OF THIS BUSINESS</b> <u>Utility provider</u></p> <p><b>FAIR MARKET VALUE</b>  <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p><b>NATURE OF INVESTMENT</b>  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>22</u>      <u>      </u> / <u>      </u> / <u>22</u>          ACQUIRED                      DISPOSED         </p>
<p>▶ <b>NAME OF BUSINESS ENTITY</b> <u>Coca Cola</u></p> <p><b>GENERAL DESCRIPTION OF THIS BUSINESS</b> <u>Soft drinks</u></p> <p><b>FAIR MARKET VALUE</b>  <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p><b>NATURE OF INVESTMENT</b>  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>22</u>      <u>      </u> / <u>      </u> / <u>22</u>          ACQUIRED                      DISPOSED         </p>	<p>▶ <b>NAME OF BUSINESS ENTITY</b> <u>Berkshire Hathaway</u></p> <p><b>GENERAL DESCRIPTION OF THIS BUSINESS</b> <u>Investments &amp; Insurance companies</u></p> <p><b>FAIR MARKET VALUE</b>  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input checked="" type="checkbox"/> Over \$1,000,000         </p> <p><b>NATURE OF INVESTMENT</b>  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>22</u>      <u>      </u> / <u>      </u> / <u>22</u>          ACQUIRED                      DISPOSED         </p>
<p>▶ <b>NAME OF BUSINESS ENTITY</b> <u>Comcast</u></p> <p><b>GENERAL DESCRIPTION OF THIS BUSINESS</b> <u>Communications</u></p> <p><b>FAIR MARKET VALUE</b>  <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p><b>NATURE OF INVESTMENT</b>  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>22</u>      <u>      </u> / <u>      </u> / <u>22</u>          ACQUIRED                      DISPOSED         </p>	<p>▶ <b>NAME OF BUSINESS ENTITY</b> _____</p> <p><b>GENERAL DESCRIPTION OF THIS BUSINESS</b> _____</p> <p><b>FAIR MARKET VALUE</b>  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p><b>NATURE OF INVESTMENT</b>  <input type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>22</u>      <u>      </u> / <u>      </u> / <u>22</u>          ACQUIRED                      DISPOSED         </p>

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

# 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  Jeffries, Kevin D

**▶ 1. BUSINESS ENTITY OR TRUST**

Maxson Holdings LLC

Name  
17668 Grand Ave  
Lake Elsinore, CA 92530

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS**

Comm Real Estate Rentals

**FAIR MARKET VALUE**

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☒ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_\_/\_\_\_\_\_/22    \_\_\_\_\_/\_\_\_\_\_/22  
 ACQUIRED    DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership    ☐ Sole Proprietorship    ☒ LLC    Other \_\_\_\_\_

YOUR BUSINESS POSITION LLC Partner**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS****FAIR MARKET VALUE**

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_\_/\_\_\_\_\_/22    \_\_\_\_\_/\_\_\_\_\_/22  
 ACQUIRED    DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership    ☐ Sole Proprietorship    ☐ \_\_\_\_\_ 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    or    ☒ Names listed below  
 Mikes Vacuum, TCH Tax Group, Coast Net, KC  
 Flooring, Loves Skate

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

Check one box:

☐ INVESTMENT    ☒ REAL PROPERTY

31861 to 31915 Mission Trail, Lake Elsinore

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

Shopping center

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:**

\_\_\_\_\_/\_\_\_\_\_/22    \_\_\_\_\_/\_\_\_\_\_/22  
 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
**▶ 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    or    ☐ Names listed below

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

Check one box:

☐ INVESTMENT    ☐ 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

**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_\_/\_\_\_\_\_/22    \_\_\_\_\_/\_\_\_\_\_/22  
 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

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

Jeffries, Kevin D

**▶ 1. BUSINESS ENTITY OR TRUST**

Crane Street Industrial LLC

Name

17668 Grand Ave

Lake Elsinore, CA 92530

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2**GENERAL DESCRIPTION OF THIS BUSINESS**

Comm Real Estate rentals

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999☐ \$2,000 - \$10,000☐ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☒ Over \$1,000,000\_\_\_\_/\_\_\_\_/22  
ACQUIRED\_\_\_\_/\_\_\_\_/22  
DISPOSED

NATURE OF INVESTMENT

☐ Partnership☐ Sole Proprietorship☒ LLC

Other

YOUR BUSINESS POSITION LLC Partner

**▶ 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 or ☒ Names listed below

Greely Fabricators, Trust In Solutions

SoCal Retail, &amp; WFP Construction

Troy's Contracting

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

Check one box:

☐ INVESTMENT☒ REAL PROPERTY

510 Crane St &amp; 18500 Pasadena St, Lake Elsinore

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

Comm/light Indst. units

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☐ \$100,001 - \$1,000,000☒ Over \$1,000,000\_\_\_\_/\_\_\_\_/22  
ACQUIRED\_\_\_\_/\_\_\_\_/22  
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**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2**GENERAL DESCRIPTION OF THIS BUSINESS**

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999☐ \$2,000 - \$10,000☐ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000\_\_\_\_/\_\_\_\_/22  
ACQUIRED\_\_\_\_/\_\_\_\_/22  
DISPOSED

NATURE OF INVESTMENT

☐ Partnership☐ Sole Proprietorship☐

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 or ☐ Names listed below**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT☐ REAL PROPERTYName 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

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000☐ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000\_\_\_\_/\_\_\_\_/22  
ACQUIRED\_\_\_\_/\_\_\_\_/22  
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

Comments:

# 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  Jeffries, Kevin D

**▶ 1. BUSINESS ENTITY OR TRUST**

Jeffries Lakeside Investments LLC

Name  
17668 Grand Ave  
Lake Elsinore, CA 92530

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS**

Commercial Real Estate

**FAIR MARKET VALUE**

IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999	____/____/22	____/____/22
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

**NATURE OF INVESTMENT**
☐ Partnership    ☐ Sole Proprietorship    ☒ LLC    ☐ Other
YOUR BUSINESS POSITION LLC Partner**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS****FAIR MARKET VALUE**

IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999	____/____/22	____/____/22
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

**NATURE OF INVESTMENT**
☐ Partnership    ☐ Sole Proprietorship    ☐ Other

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

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

<input type="checkbox"/> \$0 - \$499	<input checked="" type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$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    or    ☒ Names listed below  
Engineering Solutions
**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☒ REAL PROPERTY

31600 Railroad Canyon Rd, Canyon Lake

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

Professional Office suites

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	____/____/22	____/____/22
<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**
☒ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

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

☐ Check box if additional schedules reporting investments or real property are attached
**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$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    or    ☐ Names listed below
**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☐ 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

**FAIR MARKET VALUE**

IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000	____/____/22	____/____/22
<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**
☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

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

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

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



# 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 _____
Jeffries, Kevin D

**▶ 1. BUSINESS ENTITY OR TRUST**

Jeffries Family Investments LLC

Name

17668 Grand Ave

Lake Elsinore, CA 92530

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS**

Residential Rental Investments

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999☐ \$2,000 - \$10,000☐ \$10,001 - \$100,000☒ \$100,001 - \$1,000,000☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/22

ACQUIRED

\_\_\_\_/\_\_\_\_/22

DISPOSED

**NATURE OF INVESTMENT**☐ Partnership☐ Sole Proprietorship☒ LLC

Other \_\_\_\_\_

YOUR BUSINESS POSITION LLC Partner**▶ 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 or ☒ Names listed below

Edmonson. Ponds.

Liptrapp

Babb. Hernandez.

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

Check one box:

☐ INVESTMENT☒ REAL PROPERTY

17623 Bobrick St, Lake Elsinore

Name of Business Entity, if Investment, or

Assessor's Parcel Number or Street Address of Real Property

Resid. rental 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☒ \$100,001 - \$1,000,000☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/22

ACQUIRED

\_\_\_\_/\_\_\_\_/22

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**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS**

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999☐ \$2,000 - \$10,000☐ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/22

ACQUIRED

\_\_\_\_/\_\_\_\_/22

DISPOSED

**NATURE OF INVESTMENT**☐ Partnership☐ Sole Proprietorship☐

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 or ☐ Names listed below**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT☐ 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

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000☐ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/22

ACQUIRED

\_\_\_\_/\_\_\_\_/22

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

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

Jeffries, Kevin D

**▶ 1. BUSINESS ENTITY OR TRUST**

Flint Street Commerce Center LLC

Name  
17668 Grand Ave  
Lake Elsinore, CA 92530

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

## GENERAL DESCRIPTION OF THIS BUSINESS

Comm Real Estate Rentals

## FAIR MARKET VALUE

## IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☒ Over \$1,000,000

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
ACQUIRED      DISPOSED

## NATURE OF INVESTMENT

☐ Partnership ☐ Sole Proprietorship ☒ LLC ☐ Other
YOUR BUSINESS POSITION LLC Partner**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

## GENERAL DESCRIPTION OF THIS BUSINESS

## FAIR MARKET VALUE

## IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
ACQUIRED      DISPOSED

## NATURE OF INVESTMENT

☐ Partnership ☐ Sole Proprietorship ☐ 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 or ☒ Names listed below  
 Value Auto, Villa Trade, Leo's Auto, & Goodworx's  
 American Materials, USA Metal Polishers, Johns  
 Drivelines  
 Johnnys Upholstry, Jr's Upholstry

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

Check one box:

☐ INVESTMENT ☒ REAL PROPERTY

1206 Flint Street, Lake Elsinore

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

Comm./ Light Indst. units

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  
☐ \$100,001 - \$1,000,000  
☒ Over \$1,000,000

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
ACQUIRED      DISPOSED

## 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**▶ 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 or ☐ Names listed below**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT ☐ REAL PROPERTYName of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real PropertyDescription 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  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
ACQUIRED      DISPOSED

## 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: \_\_\_\_\_

# 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

Jeffries, Kevin D

**▶ 1. BUSINESS ENTITY OR TRUST**

Maxson Jeffries Investments LLC (CONTINUATION)

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS****FAIR MARKET VALUE**

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_\_/\_\_\_\_\_/22    \_\_\_\_\_/\_\_\_\_\_/22  
 ACQUIRED    DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership    ☐ Sole Proprietorship    ☐ \_\_\_\_\_ 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    or    ☐ Names listed below
**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☒ REAL PROPERTY

17655 Grand Ave &amp; storage lot, Lake Elsinore

Name of Business Entity, if Investment, or

Assessor's Parcel Number or Street Address of Real Property

Personal Office/Shop

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:**

\_\_\_\_\_/\_\_\_\_\_/22    \_\_\_\_\_/\_\_\_\_\_/22  
 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
**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS****FAIR MARKET VALUE**

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_\_/\_\_\_\_\_/22    \_\_\_\_\_/\_\_\_\_\_/22  
 ACQUIRED    DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership    ☐ Sole Proprietorship    ☐ \_\_\_\_\_ 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    or    ☐ Names listed below
**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☐ 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

**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_\_/\_\_\_\_\_/22    \_\_\_\_\_/\_\_\_\_\_/22  
 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

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

Jeffries, Kevin D

**▶ 1. BUSINESS ENTITY OR TRUST**

Maxson Jeffries Investments LLC

Name  
17668 Grand Ave  
Lake Elsinore, CA 92530

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS**

Investments (stocks, bonds, real estate)

**FAIR MARKET VALUE**

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☒ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/22    \_\_\_\_/\_\_\_\_/22  
 ACQUIRED    DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership    ☐ Sole Proprietorship    ☒ LLC    Other \_\_\_\_\_

YOUR BUSINESS POSITION LLC Partner**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2
**GENERAL DESCRIPTION OF THIS BUSINESS****FAIR MARKET VALUE**

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/22    \_\_\_\_/\_\_\_\_/22  
 ACQUIRED    DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership    ☐ Sole Proprietorship    ☐ 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    or    ☒ Names listed below  
 Church of God

All Sports

Village Wood Shoppe

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

Check one box:

☐ INVESTMENT    ☒ REAL PROPERTY

17657 Grand &amp; Raley St storage lot, Lake Elsinore

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

Comm. Building rental

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:**

\_\_\_\_/\_\_\_\_/22    \_\_\_\_/\_\_\_\_/22  
 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

**▶ 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    or    ☐ Names listed below

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

Check one box:

☐ INVESTMENT    ☐ 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

**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/22    \_\_\_\_/\_\_\_\_/22  
 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

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



# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**
**FAIR POLITICAL PRACTICES COMMISSION**
**Name**
Jeffries, Kevin D
**▶ 1. INCOME RECEIVED**
**NAME OF SOURCE OF INCOME**
Jeffries Family Investments LLC
**ADDRESS (Business Address Acceptable)**
17668 Grand Ave
Lake Elsinore, CA 92530
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**
Resid. rental properties
**YOUR BUSINESS POSITION**
LLC Partner
**GROSS INCOME RECEIVED**
☐ \$500 - \$1,000

☒ \$10,001 - \$100,000

☐ No Income - Business Position Only

☐ \$1,001 - \$10,000

☐ OVER \$100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**
☐ 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.)

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☒ Rental Income, list each source of \$10,000 or more  
(see A-2)

(Describe)

☐ Other \_\_\_\_\_  
(Describe)

**▶ 1. INCOME RECEIVED**
**NAME OF SOURCE OF INCOME**
Jeffries Lakeside Investments LLC
**ADDRESS (Business Address Acceptable)**
17668 Grand Ave
Lake Elsinore, CA 92530
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**
Comm./Office rentals
**YOUR BUSINESS POSITION**
LLC Partner
**GROSS INCOME RECEIVED**
☐ \$500 - \$1,000

☒ \$10,001 - \$100,000

☐ No Income - Business Position Only

☐ \$1,001 - \$10,000

☐ OVER \$100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**
☐ 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.)

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☒ Rental Income, list each source of \$10,000 or more  
(see A-2)

(Describe)

☐ Other \_\_\_\_\_  
(Describe)

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

\* You are not required to report loans from a commercial lending institution, 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:**

# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b>
FAIR POLITICAL PRACTICES COMMISSION
Name _____
Jeffries, Kevin D

**▶ 1. INCOME RECEIVED**

## NAME OF SOURCE OF INCOME

Maxson Jeffries Investments LLC

ADDRESS (Business Address Acceptable)

17668 Grand Ave

Lake Elsinore, CA 92530

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Comm./Office property rentals

YOUR BUSINESS POSITION

LLC Partner

GROSS INCOME RECEIVED

☐ No Income - Business Position Only☐ \$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  
(For self-employed use Schedule A-2.)☐ Partnership (Less than 10% ownership. For 10% or greater use  
Schedule A-2.)☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)☐ Loan repayment☐ Commission or ☒ Rental Income, list each source of \$10,000 or more  
(see A-2)

(Describe)

☐ Other \_\_\_\_\_  
(Describe)**▶ 1. INCOME RECEIVED**

## NAME OF SOURCE OF INCOME

Flint Street Commerce Center LLC

ADDRESS (Business Address Acceptable)

17668 Grand Ave

Lake Elsinore, CA 92530

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Comm./Indust. property rentals

YOUR BUSINESS POSITION

LLC partner

GROSS INCOME RECEIVED

☐ No Income - Business Position Only☐ \$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  
(For self-employed use Schedule A-2.)☐ Partnership (Less than 10% ownership. For 10% or greater use  
Schedule A-2.)☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)☐ Loan repayment☐ Commission or ☒ Rental Income, list each source of \$10,000 or more  
(see A-2)

(Describe)

☐ Other \_\_\_\_\_  
(Describe)**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from a commercial lending institution, 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

TERM (Months/Years)

\_\_\_\_\_% ☐ None

## SECURITY FOR LOAN

☐ None ☐ Personal residence☐ Real Property \_\_\_\_\_  
Street address

City

☐ Guarantor \_\_\_\_\_☐ Other \_\_\_\_\_  
(Describe)

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



# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Jeffries, Kevin D

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Maxson Holdings LLC

ADDRESS (Business Address Acceptable)

17668 Grand Ave

Lake Elsinore, CA 92530

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Comm./Retail Office rentals

YOUR BUSINESS POSITION

LLC Partner

 GROSS INCOME RECEIVED ☐ No Income - Business Position Only

☐ \$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  
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use  
Schedule A-2.)

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☒ Rental Income, list each source of \$10,000 or more  
(see A-2)

(Describe)

☐ Other \_\_\_\_\_  
(Describe)

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Warner Bros. Pictures

ADDRESS (Business Address Acceptable)

4000 Warner Blvd

Burbank, CA 91522

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Motion Picture Royalties

YOUR BUSINESS POSITION

Beneficiary

 GROSS INCOME RECEIVED ☐ No Income - Business Position Only

☐ \$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  
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use  
Schedule A-2.)

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

(Describe)

☒ Other Royalties  
(Describe)

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

\* You are not required to report loans from a commercial lending institution, 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

TERM (Months/Years)

 \_\_\_\_\_% ☐ None

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address

City

☐ Guarantor

☐ Other \_\_\_\_\_  
(Describe)

Comments:

# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM</b>	<b>700</b>
<b>FAIR POLITICAL PRACTICES COMMISSION</b>	
Name	
<u>Jeffries, Kevin D</u>	

**▶ 1. INCOME RECEIVED**

## NAME OF SOURCE OF INCOME

Kevin Jeffries For Supervisor 2020 Office Holder Acct

## ADDRESS (Business Address Acceptable)

4201 Brockton Ave Ste 100Riverside, CA 92501

## BUSINESS ACTIVITY, IF ANY, OF SOURCE

Campaign / Office Holder Acct

## YOUR BUSINESS POSITION

Office Holder

## GROSS INCOME RECEIVED

☐ No Income - Business Position Only☒ \$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  
(For self-employed use Schedule A-2.)☐ Partnership (Less than 10% ownership. For 10% or greater use  
Schedule A-2.)☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)☐ Loan repayment☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

(Describe)

☒ Other candidate / Office Holder account

(Describe)

**▶ 1. INCOME RECEIVED**

## NAME OF SOURCE OF INCOME

Crane Street Industrial LLC

## ADDRESS (Business Address Acceptable)

17668 Grand AveLake Elsinore, CA 92530

## BUSINESS ACTIVITY, IF ANY, OF SOURCE

light Industrial property rentals

## YOUR BUSINESS POSITION

LLC Partner

## GROSS INCOME RECEIVED

☐ No Income - Business Position Only☐ \$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  
(For self-employed use Schedule A-2.)☐ Partnership (Less than 10% ownership. For 10% or greater use  
Schedule A-2.)☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)☐ Loan repayment☐ Commission or ☒ Rental Income, list each source of \$10,000 or more

(see A-2)

(Describe)

☐ Other \_\_\_\_\_

(Describe)

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

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## 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

## TERM (Months/Years)

\_\_\_\_\_% ☐ None

## SECURITY FOR LOAN

☐ None☐ Personal residence☐ Real Property \_\_\_\_\_

Street address

City

☐ Guarantor \_\_\_\_\_☐ Other \_\_\_\_\_

(Describe)

## Comments:

# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b>
<b>FAIR POLITICAL PRACTICES COMMISSION</b>
Name <u>Jeffries, Kevin D</u>

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Church Of God

ADDRESS (Business Address Acceptable)

22810 Alessandro BlvdMoreno Valley, CA 92552

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Religious Facility

YOUR BUSINESS POSITION

Mortgage Holder

GROSS INCOME RECEIVED

☐ No Income - Business Position Only☐ \$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  
(For self-employed use Schedule A-2.)☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)☒ Loan repayment☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

(Describe)

☐ Other \_\_\_\_\_  
(Describe)**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

NBC Universal LLC

ADDRESS (Business Address Acceptable)

100 Univesal City PlazaUniversal City, CA 91608

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Motion Picture Royalties

YOUR BUSINESS POSITION

Beneficiary

GROSS INCOME RECEIVED

☐ No Income - Business Position Only☒ \$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  
(For self-employed use Schedule A-2.)☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)☐ Loan repayment☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

(Describe)

☒ Other TV & Motion Picture Royalties  
(Describe)**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

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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

TERM (Months/Years)

\_\_\_\_\_%

☐ None

SECURITY FOR LOAN

☐ None☐ Personal residence☐ Real Property\_\_\_\_\_  
Street address\_\_\_\_\_  
City☐ Guarantor☐ Other\_\_\_\_\_  
(Describe)

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



RECEIVED

FEB 09 2023

BY: \_\_\_\_\_

