

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE**  
A PUBLIC DOCUMENT

Date Initial Filing Received  
**RECEIVED**  
Filing Official Use Only

**MAR 30 2022**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Whalen Robert J.

City Clerk's Office  
City of Laguna Beach, CA

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

Agency Name (Do not use acronyms)

City of Laguna Beach

Division, Board, Department, District, if applicable

City Council

Your Position

Mayor/Councilmember

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

Agency: Laguna Beach County Water District

Position: President/Board Member

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

☐ State

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of Laguna Beach

☐ Other

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

☒ **Annual:** The period covered is January 1, 2021, through  
December 31, 2021.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
December 31, 2021.

☐ **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one circle.)

☐ The period covered is January 1, 2021, through the date of  
leaving office.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
the date of leaving office.

☐ **Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ **Candidate:** Date of Election \_\_\_\_ and office sought, if different than Part 1: \_\_\_\_

**4. Schedule Summary (must complete) ► Total number of pages including this cover page: 14**

**Schedules attached**

☒ **Schedule A-1 - Investments** – schedule attached

☒ **Schedule C - Income, Loans, & Business Positions** – schedule attached

☒ **Schedule A-2 - Investments** – schedule attached

☒ **Schedule D - Income – Gifts** – schedule attached

☒ **Schedule B - Real Property** – schedule attached

☐ **Schedule E - Income – Gifts – Travel Payments** – 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)				
660 Newport Center Drive, Suite 1600		Newport Beach,	CA	92651
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
( 949 ) 725-4166		rwhalen@stradlinglaw.com		

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 03/30/2022  
(month, day, year)

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

Print

Clear