

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

Date Initial Filing Received  
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**FEB 25 2021**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) **City Clerk's Office  
City of Laguna Beach, CA**  
**Kleiser Timothy Craig**

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

Agency Name (Do not use acronyms)  
**Laguna Beach Police Department**

Division, Board, Department, District, if applicable Your Position  
**Field Services Lieutenant**

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

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**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, 2020, through December 31, 2020.
- Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
(Check one circle.)
- or-** The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_\_, through December 31, 2020.
- The period covered is January 1, 2020, through the date of leaving office.
- Assuming Office:** Date assumed **02/28/2017**
- or-** The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_\_, through the date of leaving office.
- 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: 1**

**Schedules attached**

- Schedule A-1 - Investments** – schedule attached
- Schedule A-2 - Investments** – schedule attached
- Schedule B - Real Property** – schedule attached
- Schedule C - Income, Loans, & Business Positions** – schedule attached
- Schedule D - Income – Gifts** – schedule attached
- Schedule E - Income – Gifts – Travel Payments** – schedule attached

**-or-  None - No reportable interests on any schedule**

**5. Verification**

MAILING ADDRESS <i>(Business or Agency Address Recommended - Public Document)</i>	STREET	CITY	STATE	ZIP CODE
<b>505 Forest Ave</b>		<b>Laguna Beach</b>	<b>CA</b>	<b>92651</b>
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS			
<b>(949) 464-6655</b>	<b>tkleiser@lagunabeachcity.net</b>			

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 **2/25/2021** Signature   
*(month, day, year)* *(File the originally signed paper statement with your filing official.)*