CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS E C Party Initial Filing Received COVER PAGE CITY OF CORONA

A PUBLIC DOCUMENT

CITY CLERK

Please type or print in ink.		THE 2 PH Q
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Tolstikov	Serge	A
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
Serge Tolstikov for Government 2	022	
Division, Board, Department, District, if applic	able	Your Position
District 5		Member of the City Council, City of Corona
▶ If filing for multiple positions, list below or	on an attachment. (Do	not use acronyms)
Agency: City of Copon	a	Position: City Council Member
2. Jurisdiction of Office (Check at lea	st one box)	
State		Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County	11 12	County of Riverside
City of		Other
3. Type of Statement (Check at least of	one box)	
Annual: The period covered is January December 31, 2021.		Leaving Office: Date Left/(Check one circle.)
The period covered is/_ December 31, 2021.	, three	ough The period covered is January 1, 2021, through the date of leaving office.
Assuming Office: Date assumed		The period covered is/, through the date of leaving office.
Candidate: Date of Election	and office s	sought, if different than Part 1:
4. Schedule Summary (must comp	lete) ► Total nu	mber of pages including this cover page: 3
Schedules attached		
Schedule A-1 - Investments - schedu	ule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments - schedu	ile attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property - schedu	ile attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- None - No reportable interes	ts on anv schedule	
5. Verification	, , , , , , , , , , , , , , , , , , , ,	
MAILING ADDRESS STREET		STATE ZIP CODE
(Business or Agency Address Recommended - Public Do	sument)	
I have used all reasonable diligence in prepar	ing this statement. I hav	re reviewed this statement and to the best of my knowledge the information contained
herein and in any attached schedules is true	and complete. I acknow	wledge this is a public document.
I certify under penalty of perjury under the	laws of the State of C	California that
Date Signed 08/11/2022		Signature
(month, day, year)		

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
S.T.A.R. Appliance Repair	
Nome	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS Appliance Repair	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 /21 /21 /21 /21 /21 /21 /21
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	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	➤ 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	\$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	► 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:	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
INVESTMENT REAL PROPERTY S.T.A.R. Appliance Repair, Suite 13	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: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST
Leasehold 4 Other	Property Ownership/Deed of Trust Stock Partnership Leasehold Other
Yrs. remaining Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property
Comments:	are attached

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSIO	-41
Name	

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
S.T.A.R. Appliance Repair	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Appliance repair and service	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Owner	7
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 OVER \$100,000	\$10,001 - \$100,000 OVER \$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.)
Loan repayment	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
(Describe)	(Describe)
Other	Other
(Describe)	(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING	
You are not required to report loans from a commercial	I lending institution, or any indebtedness created as part of
a retail installment or credit card transaction, made in t	he lender's regular course of business on terms available
regular course of business must be disclosed as follow	status. Personal loans and loans received not in a lender's
	o.
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	% None
ADDRESS (Business Address Acceptable)	
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	at a second of the second of t
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
OVER \$100,000	_
	Other(Describe)
0	(/
Comments:	