

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

Date Initial Filing Received  
Filing Official Use Only

Received  
City of Mission Viejo

JUL 29 2022

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Raths Gregory Gerard  
City Clerk

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

Agency Name (Do not use acronyms)

City of Mission Viejo

Division, Board, Department, District, if applicable

Your Position

District 3

Councilman

► 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 Mission Viejo

Other \_\_\_\_\_

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

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

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

-or-

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

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

-or-

Assuming Office: Date assumed \_\_\_\_\_

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

Candidate: Date of Election 11/08/2022 and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary (must complete) ► Total number of pages including this cover page: 2**

**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**

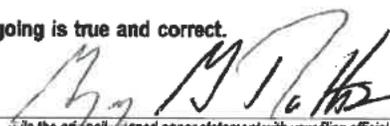
MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS

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 07/25/2022  
(month, day, year)

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

Print

Clear

**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.*

Name  
Greg Rath

▶ **NAME OF BUSINESS ENTITY**  
Apple

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Computers/cell phones

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 21         /      / 21  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Nationwide Financial

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Retirement Fund

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock     Other Retirement Fund (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 21         /      / 21  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Select Strategic Financial

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Financial Services

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock     Other ETF (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 21         /      / 21  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
\_\_\_\_\_

**GENERAL DESCRIPTION OF THIS BUSINESS**  
\_\_\_\_\_

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 21         /      / 21  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Greg Allianz Life Insurance

**GENERAL DESCRIPTION OF THIS BUSINESS**  
IRA

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock     Other Annuity (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 21         /      / 21  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
\_\_\_\_\_

**GENERAL DESCRIPTION OF THIS BUSINESS**  
\_\_\_\_\_

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock     Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 21         /      / 21  
 ACQUIRED                      DISPOSED

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

**Print**    **Clear**