

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk

EP OTC

NAME (LAST) (FIRST) (MIDDLE) DAYTIME TELEPHONE NUMBER
Rocha Donald 408-535-4909

REPORTING PERIOD
July 1-Sept. 30, 2016

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) 0

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is more than \$500, proceed to Section 2. If aggregate in Reporting Year is less than \$500, proceed to Section 5.

2. INCOME EARNED THIS REPORTING YEAR

\$0 - \$499* \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is less than \$500, proceed to Section 5.
If aggregate in Reporting Year is more than \$500, proceed to Section 3.

3. BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY & DESCRIPTION OF SERVICES

NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY

ADDRESS

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization _____ Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:

POSITION: _____

GENERAL DESCRIPTION OF SERVICES RENDERED: _____

4. LIST EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$5,000 OR MORE FOR THIS REPORTING PERIOD AND IF THE AGGREGATE IN REPORTING YEAR IS \$5,000 OR MORE (attach a separate sheet if necessary)

5. VERIFICATION

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

Signature Donald Rocha
(File the originally signed statement with the City Clerk.)

Date Signed 10/14/16
(month, day, year)

Type or print in ink.
Amounts may be rounded to whole dollars.

RECEIVED
San Jose City Clerk

Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL Rocha, Donald		Date of This Filing _____	Date Stamp 2016 OCT 14 PM 4:03 EP OTC	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT 7/1/16 TO 09/30/16	Page ____ of ____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
March 30, 2016	\$14,400.00	(see attached sponsor spreadsheet)	Celebrate Cambrian-District 9 Community Festival
Aug. 17, 2016	\$250.00	Lawrence Silva, President & CM, Yellow Cab.	Cambrian Run -District 9 Community Event
Aug. 17, 2016	\$1,500.00	Victor Duong, CA Waste Solutions 1005 Timothy Dr. San Jose, CA 95113	Cambrian Run -District 9 Community Event
Sept. 2, 2016	\$2,299.00	(see attached sponsor spreadsheet)	Fundraising for Helen Chapman -City Council Seat
Sept. 2, 2016	\$2,599.00	(see attached sponsor spreadsheet)	Fundraising for Sergio Jimenez -City Council Seat

NOTHING TO REPORT

Signature

Don Rocha

Date 10/14/2016

COMPANY NAME and TITLE	FIRST	LAST	AMOUNT	ADDRESS	CITY	STATE	ZIP
Ameriprise Financial	Robert	Ralston	\$ 100.00	1786 Wema Way	San Jose	CA	95124
Arab American Cultural Center of Silicon Valley, Chair	Vic	Zikoor	\$ 500.00	3968 Twilight Drive Building 2	San Jose	CA	95124
Charles J. Keenan III (Hamilton Management Inc.), Principal	Charles J.	Keenan	\$ 250.00	700 Emerson Street	Palo Alto	CA	94301
Christ the King Church	Mark	Lauer	\$ 250.00	1800 Hamilton Ave., Suite 205	San Jose	CA	95125
Coca-Cola, VP, Market Unit Field Operations (sodas/water)	Larry	Loeffler	\$ 400.00	2603 Camino Ramon Suite 550	San Ramon	CA	94583
Early Discoveries CDC	Lisa	Beck	\$ 100.00	14381 Bercaw Ln.	San Jose	CA	95124
Kaiser Permanente	Hanh	Nguyen	\$ 500.00	19000 Homestead Road	Cupertino	CA	95014
Le Boulanger, Inc (bagels and pastries)	Anna	Lisa	\$ 40.00	305 N. Mathilda Ave.	Sunnyvale	CA	94085
PG&E, Public Affairs	Anthony	Lin	\$ 1,000.00	111 Almaden Blvd. #810	San Jose	CA	95115
Ponderosa Homes	Jeff	Schroeder	\$ 500.00	6130 Stoneridge Mall Road #185	Pleasanton	CA	94588
Republic Services	Jeanne	Serpa	\$ 1,000.00	1601 Dixon Landing Road	Milpitas	CA	95035
San Jose Earthquakes	Marissa	Silver	\$ 500.00	1123 Coleman Avenue	San Jose	CA	95110
San Jose Water Company	Tim	McLaughlin	\$ 500.00	110 W Taylor Street	San Jose	CA	95110
San Jose Youth Shakespeare	Audrey	Rumsby	\$ 250.00	1569 Magnolia Blossom Lane	San Jose	CA	95124
S.C. & San Benito Counties Building & Construction Trades	Josue	Garcia	\$ 250.00	2102 Almaden Road, Suite 101	San Jose	CA	95125-2190
Silicon Valley Community Foundation, VP, President, Grants,	Lea	Rauscher	\$ 1,000.00	2440 West El camino Real, Suite 300	Mountain View	CA	94040
SIMS Metal Management	Jill	Rodby	\$ 500.00	600 South 4th Street	Richmond	CA	94804
South San Jose Grocery Outlet	Avez	Bashadi	\$ 200.00	1665 Foxworthy Ave	San Jose	CA	95124
The Core Companies	Chris	Neale	\$ 500.00	470 South Market Street	San Jose	CA	95113
Weingarten Realty	Lance	Sherwood	\$ 5,000.00	P.O. Box 924133	Houston	TX	77292-4133
XILINX	Dori	Dawson	\$ 1,000.00	2100 Logic Drive	San Jose	CA	95124
Yellow Checker Cab	Dave	Logan	\$ 100.00	1880 S 7th Stret	San Jose	CA	95112

\$ 14,440.00

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk

NAME (LAST) (FIRST) (MIDDLE) DAYTIME TELEPHONE NUMBER
Rocha, Donald _____ 2017 JAN 10 PM 1:12
SSM CTC 408-535-4909

REPORTING PERIOD
Oct. 1-Dec. 31, 2016

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) 0

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

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3. BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY & DESCRIPTION OF SERVICES

NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY _____
ADDRESS _____

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization _____ Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:

POSITION: _____
GENERAL DESCRIPTION OF SERVICES RENDERED: _____

4. LIST EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$5,000 OR MORE FOR THIS REPORTING PERIOD AND IF THE AGGREGATE IN REPORTING YEAR IS \$5,000 OR MORE (attach a separate sheet if necessary)

5. VERIFICATION

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

Signature Don Rocha
(File the originally signed statement with the City Clerk.)

Date Signed 1/6/17
(month, day, year)

Type or print in ink.
Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

RECEIVED
Amended
San Jose City Clerk

NAME OF ELECTED OFFICIAL Rocha, Donald		Date of This Filing	Date Stamp 2017 JAN 18 PM 4:22 EP OTC	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT Oct 1 TO Dec. 31, 16	Page ____ of ____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
10/10/16	5,000.00	Charles Keenan - Keenan Land Company 700 Emerson Street Palo Alto, CA 94301	Yes on A for Affordable Housing Campaign
9/26/16	10,000.00	John Moss - Prometheus, Executive VP & Partner Develop 1900 S. Norfolk Street, Suite 150 San Mateo, CA 94403	Yes on A for Affordable Housing Campaign
3/30/16	500.00	Vic Zikoor, Arab American Cultural Center of AACCSV 3968 Twilight Drive Building 2 San Jose, CA 95124	Celebrate Cambrian -District 9 Community Festival Aug. 2016
11/1/2016	500.00	Dave Henderson, President, Samaritan Medical Center 2581 Samaritan Drive, Suite 300 San Jose, CA 95124	Steindorf Rocks, Steindorf School Fundraiser

NOTHING TO REPORT

Signature *Don Rocha*

Date 1/18/17

Type or print in ink.
Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

RECEIVED
San Jose City Clerk

NAME OF ELECTED OFFICIAL Rocha, Donald		Date of This Filing _____	Date Stamp JAN 13 PM 1:25 EP OTC	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT Oct 1 TO Dec. 31, 16	Page ____ of ____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
10/10/16	5,000.00	Charles Keenan - Keenan Land Company 700 Emerson Street Palo Alto, CA 94301	Yes on A for Affordable Housing Campaign
9/26/16	10,000.00	John Moss - Prometheus, Executive VP & Partner Develop 1900 S. Norfolk Street, Suite 150 San Mateo, CA 94403	Yes on A for Affordable Housing Campaign
3/30/16	500.00	Vic Zikoor, Arab American Cultural Center of AACCSV 3968 Twilight Drive Building 2 San Jose, CA 95124	Celebrate Cambrian -District 9 Community Festival Aug. 2016

NOTHING TO REPORT

Signature *Donald Rocha*

Date 1/13/17

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

HWOT
RECEIVED
San Jose City Clerk

NAME (LAST) (FIRST) (MIDDLE) DAYTIME TELEPHONE NUMBER
Rocha, Donald 2017-468-635-4909 AM 11:40

REPORTING PERIOD
Jan. 1-March 31, 2017

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) _____

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

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2. INCOME EARNED THIS REPORTING YEAR

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3. BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY & DESCRIPTION OF SERVICES

NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY _____

ADDRESS _____

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization _____
Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY: _____

POSITION: _____

GENERAL DESCRIPTION OF SERVICES RENDERED: _____

4. LIST EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$5,000 OR MORE FOR THIS REPORTING PERIOD AND IF THE AGGREGATE IN REPORTING YEAR IS \$5,000 OR MORE (attach a separate sheet if necessary)

5. VERIFICATION

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

Signature *Donald Rocha*
(File the originally signed statement with the City Clerk.)

Date Signed 4/4/2017
(month, day, year)

Type or print in ink.
Amounts may be rounded to whole dollars.

JKW OT
RECEIVED
San José City Clerk

Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL <i>Rocha, Donald</i>		Date of This Filing _____	Date Stamp 2017 APR -7 AM 11:38	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD <i>Councilmember</i>	PERIOD COVERED BY THIS REPORT <i>2017</i> <i>Jan 1 TO March 31</i>	Page _____ of _____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION

NOTHING TO REPORT

Signature *Don Rocha*

Date *4/4/17*

INCOME AND TIME DISCLOSURE STATEMENT
(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk
OTC
DAYTIME TELEPHONE NUMBER
(408) 535-4909

NAME (LAST) (FIRST) (MIDDLE) _____
Rocha, Donald Richard

REPORTING PERIOD _____

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) 0

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

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Signature *Don Rocha*
(File the originally signed statement with the City Clerk.)

Date Signed 10/10/2017
(month, day, year)

Type or print in ink.
Amounts may be rounded to whole dollars.

RECEIVED
San Jose City Clerk
[Signature]

Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL <i>Rocha, Donald</i>		Date of This Filing <i>2017 OCT 13</i>	Date Stamp <i>PM 12:07</i>	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD <i>Councilmember</i>	PERIOD COVERED BY THIS REPORT <i>July 1 TO Sept 30 2017</i>	Page _____ of _____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
<i>5/25/17</i>	<i>11,400.00</i>	<i>See List (attached)</i>	<i>Celebrate Cambrian Community Festival in District 9</i>

NOTHING TO REPORT

Signature

Don Rocha

Date

10/12/17

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk

NAME (LAST) (FIRST) (MIDDLE) DAYTIME TELEPHONE NUMBER
Rocha Donald 2017 JUL 11 408-535-4909

REPORTING PERIOD
April 1-June 30 2017

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) _____

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

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\$0 - \$499* \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

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Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization _____
Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY: _____

POSITION: _____

GENERAL DESCRIPTION OF SERVICES RENDERED: _____

4. LIST EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$5,000 OR MORE FOR THIS REPORTING PERIOD AND IF THE AGGREGATE IN REPORTING YEAR IS \$5,000 OR MORE (attach a separate sheet if necessary)

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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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature Don Rocha
(File the originally signed statement with the City Clerk.)

Date Signed 6/27/17
(month, day, year)

Type or print in ink.
Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

RECEIVED
San Jose City Clerk

NAME OF ELECTED OFFICIAL Rocha, Donald		Date of This Filing 2017 JUL 11 AM 11:05	Date Stamp 2017 JUL 11 AM 11:05	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT April 1 TO June 30	Page ____ of ____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
5/25/17	\$ 100.00	Laura Nenada, CareMore, 255 N. White Road, #200 B San Jose CA 95127 - 1966, Community Relations Consultant	Celebrate Cambrian Community Festival in District 9
5/25/17	\$ 600.00	Fabrizio Oria, MRZ, LLC. Silver Creek Sports Complex, 800 Embedded Way STE #10 San Jose CA 95138, Coach/Director	Celebrate Cambrian Community Festival in District 9
5/25/17	\$ 600.00	Jill Rodby, SIMS Metal Management, 600 4th Street Richmond, CA 94804, Public Affairs and Government Relations Manager	Celebrate Cambrian Community Festival in District 9

NOTHING TO REPORT

Signature

Date

6/29/17

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk

NAME (LAST) (FIRST) (MIDDLE) DAYTIME TELEPHONE NUMBER
Rocha Donald 2017 JUL 11 408-535-4909

REPORTING PERIOD
April 1-June 30 2017

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) _____

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

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Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization _____
Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY: _____

POSITION: _____

GENERAL DESCRIPTION OF SERVICES RENDERED: _____

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Signature Don Rocha
(File the originally signed statement with the City Clerk.)

Date Signed 6/27/17
(month, day, year)

Type or print in ink.
Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

RECEIVED
San Jose City Clerk

NAME OF ELECTED OFFICIAL Rocha, Donald		Date of This Filing 2017 JUL 11 AM 11:05	Date Stamp 2017 JUL 11 AM 11:05	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT April 1 TO June 30	Page ____ of ____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
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5/25/17	\$ 600.00	Fabrizio Oria, MRZ, LLC. Silver Creek Sports Complex, 800 Embedded Way STE #10 San Jose CA 95138, Coach/Director	Celebrate Cambrian Community Festival in District 9
5/25/17	\$ 600.00	Jill Rodby, SIMS Metal Management, 600 4th Street Richmond, CA 94804, Public Affairs and Government Relations Manager	Celebrate Cambrian Community Festival in District 9

NOTHING TO REPORT

Signature

Date

6/29/17

INCOME AND TIME DISCLOSURE STATEMENT
(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk
OTC
DAYTIME TELEPHONE NUMBER
(408) 535-4909

NAME (LAST) (FIRST) (MIDDLE) _____
Rocha, Donald Richard

REPORTING PERIOD _____

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) 0

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Proprietorship Partnership LLC Corporation

Trust Governmental Agency Nonprofit Organization _____ Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY: _____

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Signature *Don Rocha*
(File the originally signed statement with the City Clerk.)

Date Signed 10/10/2017
(month, day, year)

Type or print in ink.
Amounts may be rounded to whole dollars.

RECEIVED
San Jose City Clerk
[Signature]

Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL Rocha, Donald		Date of This Filing 2017 OCT 13	Date Stamp PM 12:07	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT July 1 TO Sept 30 2017	Page ____ of ____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
5/25/17	11,400.00	See List (attached)	Celebrate Cambrian Community Festival in District 9

NOTHING TO REPORT

Signature

Don Rocha

Date

10/12/17

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk
OT

DAYTIME TELEPHONE NUMBER

2018 JAN 11 11:09 AM
408-535-4909

NAME (LAST) (FIRST) (MIDDLE)
Rocha, Donald

REPORTING PERIOD
Oct 1-Dec. 31, 2017

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) _____

1. INCOME EARNED THIS REPORTING PERIOD*

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NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY

ADDRESS

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization _____
Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:

POSITION: _____

GENERAL DESCRIPTION OF SERVICES RENDERED: _____

4. LIST EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$5,000 OR MORE FOR THIS REPORTING PERIOD AND IF THE AGGREGATE IN REPORTING YEAR IS \$5,000 OR MORE (attach a separate sheet if necessary)

5. VERIFICATION

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature *Don Rocha*
(File the originally signed statement with the City Clerk.)

Date Signed 1/8/18
(month, day, year)

Type or print in ink.
Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

RECEIVED
San Jose City Clerk

NAME OF ELECTED OFFICIAL Rocha, Donald		Date of This Filing _____	Date Stamp 2018 JAN 11 PM 4:22	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT Oct. 1 ²⁰¹⁷ TO Dec. 31	Page _____ of _____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION



NOTHING TO REPORT

Signature: Don Rocha

DATE: 1/8/17

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk
2018
DAYTIME TELEPHONE NUMBER
408-535-4909

NAME (LAST) (FIRST) (MIDDLE)
Rocha, Donald Richard

REPORTING PERIOD
 Jan 1-March 31 2018 April 1-June 30 July 1-Sept 30 Oct 1-Dec 31

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) none

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is more than \$500, proceed to Section 2. If aggregate in Reporting Year is less than \$500, proceed to Section 5.

2. INCOME EARNED THIS REPORTING YEAR

\$0 - \$499* \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is less than \$500, proceed to Section 5.
If aggregate in Reporting Year is more than \$500, proceed to Section 3.

3. BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY & DESCRIPTION OF SERVICES

NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY
ADDRESS

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:

POSITION:

GENERAL DESCRIPTION OF SERVICES RENDERED:

4. LIST EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$5,000 OR MORE FOR THIS REPORTING PERIOD AND IF THE AGGREGATE IN REPORTING YEAR IS \$5,000 OR MORE (attach a separate sheet if necessary)

5. VERIFICATION

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature Don Rocha
(File the originally signed statement with the City Clerk.)

Date Signed 4/3/18
(month, day, year)

RESET

Type or print in ink.
Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL Donald Rocha		Date of This Filing _____	RECEIVED San José City Clerk Date Stamp <i>DR</i> 2018 APR -3 PM 3:30	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT 1/1/18 TO 3/31/18	Page 1 of 1		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION



NOTHING TO REPORT



Signature: _____

Don Rocha

DATE: 4/3/18

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

copy

NAME (LAST) (FIRST) (MIDDLE) DAY TIME RECEIVED PHONE NUMBER
Rocha, Donald _____ San Jose City Clerk

REPORTING PERIOD
April 1-June 30, 2018 **2018 JUL -2 PM 4:30**

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) 0

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is more than \$500, proceed to Section 2. If aggregate in Reporting Year is less than \$500, proceed to Section 5.

2. INCOME EARNED THIS REPORTING YEAR

\$0 - \$499* \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is less than \$500, proceed to Section 5.
If aggregate in Reporting Year is more than \$500, proceed to Section 3.

3. BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY & DESCRIPTION OF SERVICES

NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY _____

ADDRESS _____

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization _____ Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY: _____

POSITION: _____

GENERAL DESCRIPTION OF SERVICES RENDERED: _____

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5. VERIFICATION

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature Don Rocha
(File the originally signed statement with the City Clerk.)

Date Signed 6/29/18
(month, day, year)

INCOME AND TIME DISCLOSURE STATEMENT
(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk

2018 OCT 12 PM 12:29
408-535-4909

NAME (LAST) Rocha (FIRST) Donald (MIDDLE) _____ DAYTIME TELEPHONE NUMBER _____

REPORTING PERIOD July 1 - Sept. 30, 2018

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) 0

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is more than \$500, proceed to Section 2. If aggregate in Reporting Year is less than \$500, proceed to Section 5.

2. INCOME EARNED THIS REPORTING YEAR

\$0 - \$499* \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is less than \$500, proceed to Section 5.
If aggregate in Reporting Year is more than \$500, proceed to Section 3.

3. BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY & DESCRIPTION OF SERVICES

NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY _____

ADDRESS _____

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization _____
Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY: _____

POSITION: _____

GENERAL DESCRIPTION OF SERVICES RENDERED: _____

4. LIST EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$5,000 OR MORE FOR THIS REPORTING PERIOD AND IF THE AGGREGATE IN REPORTING YEAR IS \$5,000 OR MORE (attach a separate sheet if necessary)

5. VERIFICATION

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

Signature Don Rocha
(File the originally signed statement with the City Clerk.)

Date Signed 10/12/18
(month, day, year)

Type or print in ink.
Amounts may be rounded to whole dollars.

RECEIVED
San Jose City Clerk

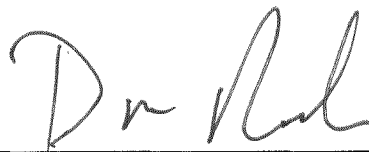
Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL Donald Rocha		Date of This Filing _____	Date Stamp 2018 OCT 12 PM 12:29	CITY OF SAN JOSE FORM DFR1 For Official Use Only
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT July 1 ²⁰¹⁸ TO Sept. 30	Page ____ of ____		

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
4/30/2018	\$1,000.00	Desiree Mitchell, Marketing Mngr., The Harker School 500 Saratoga Ave San Jose CA 95129	Celebrate Cambrian Festival in District 9
5/9/2018	\$500.00	Tammie May, Anthem/CareMore 255 N. White Rd. San Jose, CA 95127	Celebrate Cambrian Festival in District 9
5/15/2018	\$500.00	David Bini, Santa Clara & San Benito Counties Building & Construction Trades Council 2102 Almaden Road #101 San Jose, CA 95125	Celebrate Cambrian Festival in District 9
5/15/2018	\$1,000.00	Jeanne Serpa, Republic Services 1601 Dixon Landing Road Milpitas, CA 95035	Celebrate Cambrian Festival in District 9
5/15/2018	\$1,000.00	Anthony Lin, PG&E 111 Almaden Blvd. #810 San Jose CA 95115	Celebrate Cambrian Festival in District 9
5/15/2018	\$2,500.00	Nancy Brookins, Weingarten Realty 7825 Lichen Drive Citrus Heights CA 95621	Celebrate Cambrian Festival in District 9

NOTHING TO REPORT

Signature: _____



DATE: _____

10/12/18

Type or print in ink.
 Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

RECEIVED
 San Jose City Clerk **Page 2**

~~2019 OCT 12 PM 12:29~~

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
5/23/2018	\$250.00	Fabrizio Oria, Silver Creek Sportsplex 800 Embedded Way San Jose, CA 95138 Parent Company -Leisure Sports, Inc. 4670 Willow Rd. ste 100 Pleasanton, CA 94588	Celebrate Cambrian Festival in District 9
5/23/2018	\$250.00	Fabrizio Oria, Club Sports 800 Embedded Way San Jose, CA 95138 Parent Company- Leisure Sports, Inc. 4670 Willow Rd. ste 100 Pleasanton, CA 94588	Celebrate Cambrian Festival in District 9
5/24/2018	\$500.00	Erik Schoennauer, The Schoennaur Company 90 Hawthorne Way San Jose, CA 95110	Celebrate Cambrian Festival in District 9
6/11/2018	\$500.00	Hanh Nguyen, Kaiser Permanente 19000 Homestead Dr. Bldg 1, 2nd floor Cupertino, CA 95014	Celebrate Cambrian Festival in District 9
6/28/2018	\$1,000.00	Mary Grace Miller, San Jose Sharks 525 W Santa Clara St San Jose CA 95113	Celebrate Cambrian Festival in District 9
5/15/2018	\$100.00	Carl Dieter, D.C.A., Almaden Chiropractic and Wellness 5570 Sanchez Dr. Ste 100 San Jose, CA 95123	Celebrate Cambrian Festival in District 9
7/12/2018	\$100.00	Anne Souza, California Sports Center 1975 Cambrianna Drive San Jose, CA 95124	Celebrate Cambrian Festival in District 9

NOTHING TO REPORT

Type or print in ink.
Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

RECEIVED Page 3
San Jose City Clerk

2018 OCT 12 PM 12:29

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
5/15/2018	\$100.00	Kristina Micheva, Camp Carter International Karate, 14910 Camden Avenue San Jose, CA 95124	Celebrate Cambrian Festival in District 9
5/15/2018	\$100.00	Larry Loeffler, Coca Cola Company 715 Vandenberg St. Salinas, CA 93905	Celebrate Cambrian Festival in District 9
5/15/2018	\$100.00	Noah's Bagels 1140 Lincoln Ave. San Jose CA 95125	Celebrate Cambrian Festival in District 9
5/15/2018	\$100.00	Avez Bashadi, Grocery Outlet South San Jose 1665 Foxworthy Ave. San Jose, CA 95124	Celebrate Cambrian Festival in District 9
5/15/2018	\$100.00	Tony Tenaglia, Grocery Outlet West San Jose 3140 Williams Road San Jose, CA 95117	Celebrate Cambrian Festival in District 9
5/15/2018	\$25.00	Michael Trozzo, Food Maxx 1539 Parkmoor Ave. San Jose, CA 95128	Celebrate Cambrian Festival in District 9
5/15/2018	\$200.00	Peet's Coffee 2035 Camden Ave. San Jose CA 95124	Celebrate Cambrian Festival in District 9

NOTHING TO REPORT

Type or print in ink.
Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL Donald Rocha		Date of This Filing 7/2/18	RECEIVED San Jose City Clerk Date Stamp JUL -2 PM 4:30 <i>City Clerk</i>	CITY OF SAN JOSE FORM DFR1
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT 2018 April 1 TO June 30	Page 1 of 1	For Official Use Only	

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
5/15/18	\$1,000.00	The Health Trust , Maria Garcia 3180 Newberry Drive Suite 200 San Jose, CA 95118	Celebrate Cambrian Community Festival in District 9
5/15/18	\$500.00	SIMS Metal Management , Jill Rodby 600 South 4th Street Richmond, CA 94804	Celebrate Cambrian Community Festival in District 9
5/24/18	\$250.00	Yellow Checker Cab Co., Larry Silva 1880 S. 7th St. San Jose, CA 95112	Celebrate Cambrian Community Festival in District 9
5/24/18	\$1,000.00	CORE Affordable Housing, LLC (The CORE Companies), Chris Neale 470 S. Market St. San Jose. CA 95113	Celebrate Cambrian Community Festival in District 9
5/24/18	\$500.00	SAN JOSE WATER CO. Tim McLaughlin 110 W. Taylor St. San Jose, CA 95110	" "
5/24/18	\$250.00	McDonald's Rest. - CAM-BAS, Irma - Cosme Fagundo 711 Calle Artis San Jose, CA 95131	" "

PRINT

QUIT

RESET

NOTHING TO REPORT

Signature: _____

Don Rocha

DATE: _____

6/29/18

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk

DAYTIME TELEPHONE NUMBER
408-535-4909 PH 4:13

NAME (LAST) (FIRST) (MIDDLE)
Rocha, Donald

REPORTING PERIOD
 Jan 1-March 31 April 1-June 30 July 1-Sept 30 Oct 1-Dec 31 2018

During the Reporting Period, how many hours did you spend rendering services unrelated to your duties of office for which you earned income? (If your answer is none, please proceed to Section 2 below.) 0

1. INCOME EARNED THIS REPORTING PERIOD*

LESS \$500 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is more than \$500, proceed to Section 2. If aggregate in Reporting Year is less than \$500, proceed to Section 5.

2. INCOME EARNED THIS REPORTING YEAR

\$0 - \$499* \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000

*If aggregate in Reporting Year is less than \$500, proceed to Section 5.

If aggregate in Reporting Year is more than \$500, proceed to Section 3.

3. BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY & DESCRIPTION OF SERVICES

NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY

ADDRESS

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

Proprietorship Partnership LLC Corporation
 Trust Governmental Agency Nonprofit Organization Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:

POSITION: _____

GENERAL DESCRIPTION OF SERVICES RENDERED: _____

4. LIST EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$5,000 OR MORE FOR THIS REPORTING PERIOD AND IF THE AGGREGATE IN REPORTING YEAR IS \$5,000 OR MORE (attach a separate sheet if necessary)

5. VERIFICATION

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature Don Rocha
(File the originally signed statement with the City Clerk.)

Date Signed 12/6/18
(month, day, year)

RESET

Type or print in ink.
Amounts may be rounded to whole dollars.

Disclosure of Fundraising Report Form

RECEIVED
San Jose City Clerk
Date Stamp
OTW
2018 DEC -7 PM 4:13

CITY OF SAN JOSE FORM DFR1
For Official Use Only

NAME OF ELECTED OFFICIAL Donald Rocha		Date of This Filing _____
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT Oct. 1 ²⁰¹⁸ TO Dec. 31	Page _____ of _____

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION



NOTHING TO REPORT

Signature: *Donald Rocha*

DATE: 12/6/18