INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

RECEIVED SO OTC

NAME Jimenez	(LAST)	(FIRST) Sergio	(MIDDLE)		DAYTIME TELEPHONE NUMBER (408) 535-4902
REPORTIN	IG PERIOD	December 1, 2016	to December 31, 2016		
•	, .		rs did you spend rendering sceed to Section 2 below.)	services unrelated to	your duties of office for which you earned
1. INCOME	EARNED	THIS REPORTING F	PERIOD*	P. C.	
☐ LESS	\$500	\$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100	0,000
*If aggregate Section 5.	te in Reporti	ng Year is more than	\$500, proceed to Section 2	. If aggregate in Rep	orting Year is less than \$500, proceed to
2. INCOME	EARNED	THIS REPORTING Y	EAR		
\$0 - \$	499*	S500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,	000 OVER \$100,000
• • •	•	_	5500, proceed to Section 5. 6500, proceed to Section 3.		
			NTAL AGENCY & DESCR	IPTION OF SERVIC	
NAME OF E	BUSINESS E	ENTITY/TRUST/GOV	ERNMENTAL AGENCY		
ADDRESS					
TYPE OF B	USINESS E	NTITY/TRUST/GOVE	ERNMENTAL AGENCY:		
Proprie	torship	Partnershi	LLC		☐ Corporation
☐ Trust		Governme	ental Agency	rofit Organization	Other
GENERAL I	DESCRIPTION	ON OF BUSINESS E	NTITY/TRUST/GOVERNME	ENTAL AGENCY AC	ΓΙVITY:
V					
POSITION:					
GENERAL [DESCRIPTION	ON OF SERVICES R	ENDERED:		
			RCE OF INCOME OF \$5,00 5,000 OR MORE (attach a s		HIS REPORTING PERIOD AND IF THE essary)
5. VERIFIC					
information o	contained he	le diligence in prepar rein and in any attacl hat the foregoing is	hed schedules is true and co	eviewed this stateme omplete. I certify un	nt and to the best of my knowledge the der penalty of perjury under the laws of
Signature(F	ile the origin	nally signed statemen	t with the City Clerk.)	Date Signed	Janany 17, 2017 (month, day, year)

Type or print in ink.

Amounts may be rounded to whole dollars. Quality to the

Disclosure of Fundraising Report Form Page 1 NAME OF ELECTED OFFICIAL Date Stamp 1/17/17 Date of **CITY OF SAN** Sergio Jimenez JOSE FORM This Filing OFFICE HELD PERIOD COVERED BY THIS For Official Use Only ᢝ路器 Councilmember, District 2 12-31-16 TO DATE OF **AMOUNT** DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR SOLICITATION **CONTRIBUTED** CONTRIBUTION 11-3-16 \$5,000 12/3/16 City Sponsored Gun Buy Back First 5 Santa Clara County 4000 Moorpark Ave. #200 San José CA 95117 **LYFT** 5/28/16 City Sponsored Future Roots \$500 REC'D 2300 Harrison St.

11-9-16 2300 Harrison St. San Francisco, CA 94110

NOTHING TO REPORT

\$500

11-9-16

REC'D

San Francisco, CA 94110

LYFT

8/12/16 City Sponsored Indian Flag Raising

INCOME AND TIME DISCLOSURE STATEMENT RECEIVED (San Jose Municipal Code Chapter 12.19) San Jose City Clerk FRU 07C

NAME (LAST) Jimenez	(FIRST) Sergio	(MIDDLE)	201	7 ARDANTIMEPTELEPHONE NUMBER (408) 535-4902
REPORTING PERIOR January 1, 2017 - M			·	
, , ,	•	rs did you spend rendering sceed to Section 2 below.)	services unrelated to your one	luties of office for which you earned
1. INCOME EARNE	D THIS REPORTING P	ERIOD*		Property of the Control of the Contr
☐ LESS \$500	\$500 - \$1,000	S1,001 - \$10,000	\$10,001 - \$100,000	OVER \$100,000
*If aggregate in Repor Section 5.	rting Year is more than	\$500, proceed to Section 2	. If aggregate in Reporting	Year is less than \$500, proceed to
2. INCOME EARNE	D THIS REPORTING Y	EAR		
× \$0 - \$499*	S500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,000	OVER \$100,000
*If aggregate in Repor	ting Year is less than \$	500, proceed to Section 5.		
If aggregate in Report	ing Year is more than \$	5500, proceed to Section 3.		
		NTAL AGENCY & DESCR	IPTION OF SERVICES	The second secon
NAME OF BUSINESS	S ENTITY/TRUST/GOV	ERNMENTAL AGENCY		
ADDRESS				
TYPE OF BUSINESS	ENTITY/TRUST/GOVE	ERNMENTAL AGENCY:		
☐ Proprietorship	☐ Partnership	LLC		Corporation
☐ Trust	Governme	ntal Agency	rofit Organization	Othor
				Other
GENERAL DESCRIPT	TION OF BUSINESS EI	NTITY/TRÜST/GOVERNME	ENTAL AGENCY ACTIVITY	'. '
POSITION:				
***************************************	TION OF SERVICES RE	ENDERED:		
			A AR MARE FOR THIS RE	PORTING PERIOD AND IF THE
)
- 444				
5. VERIFICATION				ing and the second seco
information contained I	nerein and in any attach	ned schedules is true and co		to the best of my knowledge the enalty of perjury under the laws of
the State of California	that the foregoing is	true and correct.		,
Signature(File the original orig	gipally signed statemen	t with the City Clerk.)	Date Signed	(month, day, year)

RECEIVED Disclosure of Fundraising Report Form Page 1 NAME OF ELECTED OFFICIAL Date Stamp Date of CITY OF SAN 4-14-15 Sergio Jimenez This Filing JOSE FORM OFFICE HELD PERIOD COVERED BY THIS For Official Use Only REPORT Councilmember 1/1/2017 3/31/2017 DATE OF **AMOUNT** DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR SOLICITATION CONTRIBUTED CONTRIBUTION

NOTHING TO REPORT 🔀

Signature

Sergio

Date 4/11/17

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



NAME (LAS		(FIRST) ergio	***************************************	(MIDDLE)			2 DAX TIME :TELEPHONE NUMBER (408) 535-4902
REPORTING PE April 1, 2017		,					
During the Repor					services unrelate none	ed to your du	ities of office for which you earned
1. INCOME EAR	aned this r	EPORTING PE	RIOD*				
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*If aggregate in R Section 5.	teporting Year	is more than \$	500, proceed to	o Section 2.	If aggregate in	Reporting Y	ear is less than \$500, proceed to
2, INCOME EAF	NED THIS R	EPORTING YE	AR		10 m		
× \$0 - \$499*	\$50	00 - \$1,000 [S1,001 - \$1	10,000	\$10,001 - \$	\$100,000	OVER \$100,000
*If aggregate in R	teporting Year	is less than \$5°	600, proceed to	Section 5.			
If aggregate in Re	eporting Year i	is more than \$5	500, proceed to	Section 3.			
3. IBUSINESS EN					IPTION OF SEE	RVICES	
NAME OF BUSIN	ESS ENTITY/	/TRUST/GOVE	RNMENTAL A	GENCY			
ADDRESS		Description of the second seco	<u> </u>				
TYPE OF BUSINE	FOO ENITITY!	TDLICTION/EE	DVIVIENITAL VC	DENICV:			
			ZINIVICINTALAC				
Proprietorship)	Partnership		☐ LLC			Corporation
☐ Trust		Government	tal Agency	☐ Nonpr	rofit Organizatio	n	Other
GENERAL DESC	RIPTION OF I	BUSINESS EN	TITY/TRUST/G	OVERNME	NTAL AGENCY	ACTIVITY:	
							•
POSITION:							
GENERAL DESCI	RIPTION OF S	SERVICES REI	NDERED:				
4. LIST EACH RE AGGREGATE I							PORTING PERIOD AND IF THE
<u> </u>				:			
5. VERIFICATION	0	11					Fire State S
	ned herein and	d in any attache	ed schedules is	true and co			o the best of my knowledge the nalty of perjury under the laws of
Signature(File the	<u>Zergn</u> e originally sign	ned statement v	with the City Cl	lerk.)	Date Siç	ned	7 /19 /1 7 (month, day, year)

Disclosure of	of Fundraisin	ng Report Form	KEUEN'EU	Page 1	
NAME OF ELECTED	OFFICIAL		Date of 7/15/2017	San Joan Stalling Clark	CITY OF SAN DEDA
Sergio Jimenez			This Filing	2017 111 20 6811.20	JOSE FORM DIKL
OFFICE HELD		PERIOD COVERED BY THIS	1 1	2017 JUL 20 AM II: 28	For Official Use Only
Councilmember		REPORT 4/1/2017 6/30/2017 TO	Page of	otc m	
DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND C	OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR F CONTRIB	
4/13/2017	\$500	Kaiser Foundation Health Plan 75 N. Fair Oaks Ave. 4th Fl. Pasadena, CA 91103		4/22/2017 City sp Great American Litt	
					`

NOTHING TO REPORT

Signature

Sergul

Date

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

NAME (LAS Jimene		ST)	(MIDDLE)			YTIME TELEPHONE NUMBER 408) 535-4902
REPORTING PE July 1, 2017 - S	RIOD September 30, 2017	1			1	
		ny hours did you sper use proceed to Section		vices unrelated to y	our duties of	office for which you earned
1. INCOME BA	rned this repor	TING PERIOD*				10 10 10 10 10 10 10 10 10 10 10 10 10 1
☐ LESS \$500	S500 - \$	1,000 🗌 \$1,001 -	· \$10,000 [\$10,001 - \$100	,000 🔲	OVER \$100,000
Section 5.			to Section 2. If	aggregate in Repo	orting Year is	less than \$500, proceed to
2, INCOME EA	KNED THIS REPOR	TING YEAR				
X \$0 - \$499*	\$500 - \$1	,000 🗌 \$1,001 -	\$10,000] \$10,001 - \$100,0	000 🔲	OVER \$100,000
*If aggregate in R	eporting Year is less	than \$500, proceed t	o Section 5.			
00 0		than \$500, proceed				
		ERNMENTAL AGENO T/GOVERNMENTAL	AL 112 (100 (100 (100 (100 (100 (100 (100	IION/OF SERVICE	S	
NAME OF BUSIN	IE00 ENTITITIO0	1/GOVERNMENTAL	AGENOT			
ADDRESS						
TYPE OF BUSIN	ESS ENTITY/TRUST	GOVERNMENTAL A	AGENCY:			
Proprietorshi	o 🗌 Par	tnership	LLC		Corpor	ation
Trust	☐ Go	vernmental Agency	Nonprofi	it Organization		Other
GENERAL DESC	RIPTION OF BUSIN	ESS ENTITY/TRUST	GOVERNMEN	TAL AGENCY ACT	IVITY:,	
POSITION:						
GENERAL DESC	RIPTION OF SERVI	CES RENDERED:				
						NG PERIOD AND IF THE
5. VERIFICATION				Fig. 1 = 1, (2)		
information contain	ned herein and in an	preparing this statem y attached schedules oing is true and corr	is true and com	ewed this statemer plete. I certify und	it and to the b der penalty o	est of my knowledge the ferjury under the laws of
	5		u.		H /	/////
Signature(File the	originally signed st	atement with the City	Clerk.)	Date Signed	101	month, day, year)

Type or print in ink.

Amounts may be rounded to whole dollars.

RECEIVED

Page 1

Disclosure of Fundraising Report Form San Jose City Clark NAME OF ELECTED OFFICIAL Date Stamp Date of 10/13/17 CITY OF SAN Sergio Jimenez 2017 OCT 16 AH 10: 56 This Filing JOSE FORM OFFICE HELD PERIOD COVERED BY THIS For Official Use Only REPORT Councilmember 7/1/17 9/30/17 TO DATE OF **AMOUNT** DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR SOLICITATION CONTRIBUTED CONTRIBUTION 9/18/17 \$500 The Schoennauer Company 10/14/17 90 Hawthorne Wy. City sponsored San Jose, CA 95110 Village Fest Angie Cocke 10/14/17 9/18/17 \$2,500 Century 21 M&M and Associates City sponsored 3150 Almaden Expressway, Suite 100, San Jose, CA 95118 Village Fest 9/18/17 \$1,000 Premier One Credit Union 10/14/17 6640 Via del Oro City sponsored San Jose, CA 95119 Village Fest 9/18/17 \$100 Pedron's Storage 10/14/17 P.O. Box 53223 City sponsored San Jose, CA 95153 Village Fest Hunter Storm LLC 10/14/17 9/18/17 \$1,000 10121 Miller Ave. Ste. 200 City sponsored Cupertino, CA 95014 Village Fest San Jose Barracuda \$110 in-kind 10/14/17 9/30/17 525 W. Santa Clara St. City sponsored tickets San Jose, CA 95113 Village Fest

NOTHING TO REPORT

Signature San

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
0/25/17	\$200 in-kind hot dogs	San Jose Police Officers Association 1151 N 4th St. San JoseCA 95112	8/25/17 City sponsored D2 Movie Night
9/18/17	\$150 in-kind gift cards	In-N-Out Burger 5611 Santa Teresa San Jose, CA 95123	10/14/17 City sponsored Village Fest
9/27/17	\$280 in-kind tickets	San Jose Earthquakes 1123 Coleman Ave. San Jose, CA 95110	10/14/17 City sponsored Village Fest
9/29/17	\$2,5000	Plumbers Steam Fitters & Refrigeration Fitters Local 393 6150 Cottle Rd. San Jose, CA 95123	10/14/17 City sponsored Village Fest
9/18/17	\$50	Carole Holcombe 5755 Cohasset Wy. San Jose, CA 95123	10/14/17 City sponsored Village Fest
9/18/17	\$50	Amanda Newlove 5671 Santa Teresa Blvd #103 San Jose, California 95153	10/14/17 City sponsored Village Fest

NOTHING TO REPORT

Signature

Sen

Date 10/13/17

(San Jose Municipal Code Chapter 12.19)

RECEIVED
San Jose City Clerk

NAME (LAST) Jimenez	(FIRST) Sergio	(MIDDLE)		2011 DAYTIME TELEPHONE NUMBER (408) 535-4902
REPORTING PERIO October 1, 2017 - D	D			
			rices unrelated to your d	luties of office for which you earned
1. INCOME EARNE	D THIS REPORTING P	ERIOD*		
LESS \$500	S500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,000	OVER \$100,000
*If aggregate in Repo Section 5.	rting Year is more than s	\$500, proceed to Section 2. If	aggregate in Reporting	Year is less than \$500, proceed to
2 INCOME EARNE	D THIS REPORTING Y	EAR		
\$0 - \$499*	\$500 - \$1,000	x \$1,001 - \$10,000] \$10,001 - \$100,000	OVER \$100,000
00 0		500, proceed to Section 5. 500, proceed to Section 3.		
		NTAL AGENCY & DESCRIPT	ION OF SERVICES	1973 - 1973 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974
,	S ENTITY/TRUST/GOVE	ERNMENTAL AGENCY), Local Agency Formation Cor	nmission of Santa Clara	County (LAFCO)
ADDRESS 375 Beale St. Ste 700) San Francisco, CA 95	113, 777 North First Street, Su	ite 410 San Jose, CA 9	5112
TYPE OF BUSINESS	ENTITY/TRUST/GOVE	RNMENTAL AGENCY:		
☐ Proprietorship	☐ Partnership	LLC		Corporation
☐ Trust	X Governmen	ntal Agency	t Organization	Planning/ research coalition of Other
		NTITY/TRUST/GOVERNMENT ents, state mandated agency	AL AGENCY ACTIVITY	:
POSITION: Board me	ember			
GENERAL DESCRIP	TION OF SERVICES RE	ENDERED:per diem paymer	nts	
		CE OF INCOME OF \$5,000 O 5,000 OR MORE (attach a sepa		PORTING PERIOD AND IF THE)
E-Page				
5. VERIFICATION				
information contained		ed schedules is true and comp		to the best of my knowledge the enalty of perjury under the laws of
Signature(File the ori	ginally signed statement	with the City Clerk	Date Signed/	(month, day, year)

Type or print in ink.

Amounts may be rounded to whole dollars.

RECEIVED San Jose Cify Clerk

Page 1

NAME OF ELECTED OFFICIAL Sergio Jimenez		Date of This Filing	1/12/18	2018 JAN 12 PM 2: 20	CITY OF SAN DFR1				
OFFICE HELD Councilmember		,	PERIOD COVERED BY THIS REPORT 10/1/17 12/31/17 TO	Page	of		For Official Use Only		
DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR				DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION		
6/1/17 rc'd 10/1/17	\$500	75 N. I	75 N. Fair Oaks Ave. 4th Fl			6/10/17 City sponsored Summer Fest			
10/1/17	\$500	75 N. I	Kaiser Permanente 75 N. Fair Oaks Ave. 4th Fl Pasadena, CA 91103			10/14/17 City sponsored Village Fest			
10/1/17	\$500	470 S.	The Core Companies 470 S. Market St. San Jose, CA 95113			10/14/17 City sponsored Village Fest			
10/1/17	\$1,000	18500	Republic Services 18500 N. Allied Wy. Phoenix, AZ 85054			10/14/17 City sponsored Village Fest			
8/11/17	\$623.94		alra oster Ct. se, CA 95136			8/11/17 City sponsored Indian Flag Raising			
							. ,		

NOTHING TO REPORT

Disclosure of Fundraising Report Form

INCOME AND TIME DISCLOSURE STATEMENT

(San Jose Municipal Code Chapter 12.19)

RECEIVED San Jose City Glerk

NAME (LAST) Jimenez	(FIRST) Sergio	(MIDDLE)	2019	DAYTIME TELEPHONE NUMBER APR (408) 535-4902-0
REPORTING PERIOD January 1, 2018 - M)			MINI HIELAU
		s did you spend rendering serv	rices unrelated to your d	luties of office for which you earned
1. INCOME EARNED	THIS REPORTING P	ERIOD*		
☐ LESS \$500	× \$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,000	OVER \$100,000
*If aggregate in Repor Section 5.	ting Year is more than	\$500, proceed to Section 2. If	aggregate in Reporting	Year is less than \$500, proceed to
2. INCOME EARNED	THIS REPORTING Y	EAR		
\$0 - \$499*	× \$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,000	OVER \$100,000
		500, proceed to Section 5.		
		5500, proceed to Section 3.		
NAME OF BUSINESS	ENTITY/TRUST/GOV	NTAL AGENCY & DESCRIPT ERNMENTAL AGENCY i), and Local Agency Formation		
ADDRESS 375 Beale Street Suite	700, San Francisco C	a 94105, and 777 North First S	Street, Suite 410, San Jo	ose, CA 95112
TYPE OF BUSINESS	ENTITY/TRUST/GOVE	ERNMENTAL AGENCY:		
Proprietorship	Partnership	LLC		Corporation
Trust	X Governme	ntal Agency 🔲 Nonprofit	t Organization 🔲 _	ABAG, LAFCO Other
GENERAL DESCRIPT ABAG, LAFCO	ION OF BUSINESS EN	NTITY/TRUST/GOVERNMENT	AL AGENCY ACTIVITY	
POSITION: Board me	mber, Commissioner			
GENERAL DESCRIPT	ION OF SERVICES RE	ENDERED: per diem paymen	ntsP	
		RCE OF INCOME OF \$5,000 O 5,000 OR MORE (attach a sepa		PORTING PERIOD AND IF THE)
5. VERIFICATION	**************************************		7	A CONTRACTOR OF THE CONTRACTOR
	erein and in any attach	ned schedules is true and comp		to the best of my knowledge the enalty of perjury under the laws of
Signature		1. 11. 11. 01. 01. d.)	Date Signed	9/18/28

RECEIVED

Page 1

Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL **CITY OF SAN** Date of 4/17/18 Sergio Jimenez JOSE FORM This Filing OFFICE HELD PERIOD COVERED BY THIS For Official Use Only REPORT Councilmember 1/1/18 3/31/18 TO DATE OF **AMOUNT** DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR **CONTRIBUTED** SOLICITATION CONTRIBUTION 3/15/18 \$25 in-kind Vitality Bowls 4/21/18 5660 Cottle Rd. 1 gift card City sponsored San Jose, CA 95123 Great American Litter Pick up Yogurtland 4/21/18 3/15/18 \$200 in-kind 5638 Cottle Rd #10 City sponsored 20 gift cards San Jose, CA 95123 Great American Litter Pick up 3/15/18 Julio's Fresh Mex 4/21/18 \$100 in-kind 5978 Silver Creek Valley Rd #25 City sponsored 10 gift cards San Jose, CA 95138 Great American Litter Pick up 3/15/18 Costco 4/21/18 \$50 in-kind 6898 Raleigh Rd City sponsored 1 gift card San Jose, CA 95119 Great American Litter Pick up New Seasons Market 4/21/18 3/15/18 \$150 in-kind 5667 Silver Creek Valley Rd. City sponsored 10 gift cards San Jose, CA 95138 Great American Litter Pick up & 50 pk. chips

NOTHING TO REPORT

Signature

Senfo

Date 4/16/18

INCOME AND TIME DISCLOSURE STATEMENTECEIVED
(San Jose Municipal Code Chapter 12.19) San Jose City Clerk

NAME	(LAST) menez	(FIRST) Sergio	(MIDDLE)	2018 J U	
	NG PERIOD 018 to June :	30, 2018			
			s did you spend rendering serviceed to Section 2 below.)	es unrelated to your d	uties of office for which you earned
1. INCOME	E EARNED	THIS REPORTING P	ERIOD*		
LESS	\$500	X \$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,000	OVER \$100,000
*If aggregated Section 5.	te in Reportir	ng Year is more than	\$500, proceed to Section 2. If a	ggregate in Reporting	Year is less than \$500, proceed to
2. INCOME	EARNED	THIS REPORTING Y	EAR		en e
□ \$0-\$	499*	× \$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,000	OVER \$100,000
*If aggregat	te in Reportir	ng Year is less than \$	500, proceed to Section 5.		
If aggregate	e in Reportin	g Year is more than \$	500, proceed to Section 3.		
3, BUSINE	SS ENTITY/	TRUST/GOVERNME	NTAL AGENCY & DESCRIPTION	ON OF SERVICES	
			ERNMENTAL AGENCY), and Local Agency Formation (Commission (LAFCO)	
ADDRESS 375 Beale S	Street Suite 7	'00, San Francisco Ca	a 94105, and 777 North First St	reet, Suite 410, San Jo	ose, CA 95112
TYPE OF B	USINESS EI	NTITY/TRUST/GOVE	RNMENTAL AGENCY:		
☐ Proprie	torship	☐ Partnership	☐ LTC		Corporation
Trust		X Governmen	ntal Agency Nonprofit (Organization	ABAG, LAFCO Other
GENERAL [ON OF BUSINESS EN	NTITY/TRUST/GOVERNMENTA	L AGENCY ACTIVITY	
7.0.10, 2.11					
POSITION:	Board mem	ber, Commissioner			
GENERAL [DESCRIPTIO	ON OF SERVICES RE	NDERED:per diem payments	S .	
			CE OF INCOME OF \$5,000 OR 5,000 OR MORE (attach a separ		PORTING PERIOD AND IF THE
5. VERIFIC	ATION				
I have used	all reasonab		ng this statement. I have review		to the best of my knowledge the nalty of perjury under the laws of
		hat the foregoing is		i dertily ulluci pe	many of porjuly under the laws of
	\Diamond				1/2-1-2
Signature (F	-ile the origin	ally signed statement	with the City Clerk.)	Date Signed	(month, day, year)

Disclosure of	of Fundraisin	g Report Form	RECEIVED	Page 1	
NAME OF ELECTE	OFFICIAL		Date of 7/15/18	dil Jose Chive Glampk	CITY OF SAN DEDA
Sergio Jimenez			This Filing	8 JUL -2 AMII: 47	JOSE FORM DFR1
OFFICE HELD		PERIOD COVERED BY THIS REPORT	7 _{1 1} ZUI	BJUL-2 AMII: 47	For Official Use Only
Councilmember		4/1/18 6/30/18 TO	Page of		
DATE OF SOLICITATION	- AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND (OCCUPATION OF CONTRIBUTOR	•	R PURPOSE OF FUNDRAISING RIBUTION
4/19/18 Rec'd	\$250	Plumbers, Steamfitters & Refrigeration Fitte 6150 Cottle Road San Jose, CA 95123	rs	4/21/18 City sponsored Great American Litter Pick up	
4/19/18	\$50 in-kind drinks/ pastries/ fruit	Hellyer Christopher Neighborhood Associat 101 Branham Ln. San Jose, CA 95111	ion	4/21/18 City sponsored Great American Litter Pick up	
5/16/18	\$ 300 in-kind hot dogs/ water	Plumbers, Steamfitters & Refrigeration Fitte 6150 Cottle Road San Jose, CA 95123	TIS .	6/6/18 City sponsored Viva Parks/ D2 Movie Night	
4/21/18	\$300 in-kind pastries coffee	Astrid Tromp Coldwell Banker 450 Curie Dr, San Jose, CA 95123		4/21/18 City sponsored Great American Litter Pick up	
4/21/18	\$900 in-kind BBQ sandwiches	Angie Cocke 3150 Almaden Expy #100 San Jose, CA 95118		4/21/18 City sponsored Great American Litter Pick up	
6/7/18	\$500	Astrid Tromp Coldwell Banker 450 Curie Dr, San Jose, CA 95123		8/18/18 City sponsored Village Fest	
4/15/18	\$30 in-kind coffee	Village Oaks Starbucks 5670 Cottle Rd. San Jose, CA 95123		4/21/18 City sponsored Great American Litter Pick up	. •
NOTHING T	O REPORT	Signature	era d		Pate 7/2/(8

INCOME AND TIME DISCLOSURE STATEMENT RECEIVED San Jose City Clerk

orch

NAME (LAST Jimenez	(FIRST) Sergio	(MIDDLE)		20PA YOME TELEPHOME YUMBER (408) 535-4902
REPORTING PER 7/1/18 through 9/				
	ng Period, how many hours di nswer is none, please proceed		unrelated to your dut	ies of office for which you earned
1. INCOME EARN	IED THIS REPORTING PERI	OD*		
☐ LESS \$500	\$500 - \$1,000	\$1,001 - \$10,000	10,001 - \$100,000	OVER \$100,000
*If aggregate in Rep Section 5.	oorting Year is more than \$50	0, proceed to Section 2. If aggr	egate in Reporting Ye	ear is less than \$500, proceed to
2. INCOME EARN	IED THIS REPORTING YEAR			
S0 - \$499*		\$1,001 - \$10,000	0,001 - \$100,000	OVER \$100,000
*If aggregate in Rep	porting Year is less than \$500	, proceed to Section 5.		
	orting Year is more than \$500			
NAME OF BUSINE	SS ENTITY/TRUST/GOVERN	AL AGENCY & DESCRIPTION IMENTAL AGENCY and Local Agency Formation Cor		
ADDRESS 375 Beale Street Su	uite 700. San Francisco Ca 94	105, and 777 North First Stree	et. Suite 410. San Jos	e, CA 95112
	S ENTITY/TRUST/GOVERN			····
Proprietorship	Partnership	LLC.	□ c	orporation
☐ Trust	X Governmental	Agency Nonprofit Org	anization	Other
		Y/TRUST/GOVERNMENTAL And Local Agency Formation Cor		
POSITION: Board	member, Commissioner			
GENERAL DESCRI	PTION OF SERVICES REND	ERED: stipend		
		OF INCOME OF \$5,000 OR MO 0 OR MORE (attach a separate		ORTING PERIOD AND IF THE
5. VERIFICATION				19
I have used all reaso information containe				the best of my knowledge the alty of perjury under the laws of
Signature(File the c	inginally signed statement wit	h the City Clerk.)	Date Signed	(month, day, year)

RECEIVED San Jose City Clerk

Page 1

Disciosure (or i dilalalali	9	JOICT OTH		Agu agod Out Clock	i age i
NAME OF ELECTER	OFFICIAL			Date of 10/15/18	Date Stamp	CITY OF SAN DFR1
Sergio Jimenez				This Filing	2018 OCT 15 PM 2: 42	JOSE FORM DERI
OFFICE HELD			PERIOD COVERED BY THIS REPORT	1 3		For Official Use Only
Councilmember			7/1/18 9/30/18 	Page of		
DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL	NAME, ADDRESS, EMPLOYER AND	OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR CONTRI	
7/1/18 rec'd	\$1,000	90 Hav	hoennauer Company wthorne Way se, CA 95110		8/18/18 City sponsored Village Fest	
3/1/18	\$2,500		Cocke Almaden Expy #100 se, CA 95118		8/18/18 City sponsored Village Fest	
3/1/18	\$500	6840 V	ere One Credit Union Via del Oro se, CA 95119		8/18/18 City sponsored Village Fest	
8/3/18	\$50	5387 1	rove Neighborhood Association Pecan Blossom Dr. sse, CA 95123		8/18/18 City sponsored Village Fest	
8/3/18	\$1,000	425 E	ose Fire Fighters, Local 230 Santa Clara St. Ste.300 ose, CA 95113		8/18/18 City sponsored Village Fest	
8/6/18	\$500	2102	Clara & San Benito Counties Trades Almaden Rd. #101 ose, CA 95125	s Council	8/18/18 City sponsored Village Fest	

Disclosure of Fundraising Report Form

NOTHING TO REPORT

Disclosure of Fundraising Report Form

Page 2

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
8/7/18	\$50	Pedron's Storage P.O. Box 53223 San Jose, CA 95153	8/18/18 City sponsored Village Fest
8/7/18	\$50	Meriwest Credit Union P.O. Box 530953 San Jose, CA 95153	8/18/18 City sponsored Village Fest
8/8/18	\$50	Allied Universal Credit Union 2290 N, 1St. #201 San Jose, CA 95131	8/18/18 City sponsored Village Fest
7/2/18	\$50	Scarnecchia Real Estate Inc. 6273 Mountford Dr. San Jose, CA 95123	8/18/18 City sponsored Village Fest
8/13/18	\$1,000	Laborers' International Union - Local 270 2195 Fortune Dr. San Jose, CA 95131	8/18/18 City sponsored Village Fest
8/13/18	\$50	Echo Church 1172 Murphy Ave. Ste. 130 San Jose, CA 95131	8/18/18 City sponsored Village Fest
8/13/18	\$50	California Sports Center 838 Malone Rd. San Jose, CA 95125	8/18/18 City sponsored Village Fest

NOTHING TO REPORT

Signature

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Date 10/15/18

Disclosure of Fundraising Report Form

Page 3

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
8/13/18	\$50	New Seasons Market 2171 San Vito Cir Monterey, CA 93940	8/18/18 City sponsored Village Fest
8/20/18	\$2,500	Plumbers, Steamfitters & Refrigeration Fitters 6150 Cottle Road San Jose, CA 95123	8/18/18 City sponsored Village Fest
9/18/18	\$817.80	Ghost Management Group 41 Discovery Irvine, CA 92618	7/11/18 City Sponsored Cannabis Roundtable
9/19/18	\$500	Kaiser Permanente 75 N. Fair Oaks Ave. 4th fl Pasadena, CA 91103	8/18/18 City sponsored Village Fest

NOTHING TO REPORT

Signature

re Sergii

Date 10/15/18

INCOME AND TIME DISCLOSURE STATEMENT RECEIVED San Jose City Clerk

orch

NAME (LAST Jimenez	(FIRST) Sergio	(MIDDLE)		20PA YOME TELEPHOME YUMBER (408) 535-4902
REPORTING PER 7/1/18 through 9/				
	ng Period, how many hours di nswer is none, please proceed		unrelated to your dut	ies of office for which you earned
1. INCOME EARN	IED THIS REPORTING PERI	OD*		
☐ LESS \$500	\$500 - \$1,000	\$1,001 - \$10,000	10,001 - \$100,000	OVER \$100,000
*If aggregate in Rep Section 5.	oorting Year is more than \$50	0, proceed to Section 2. If aggr	egate in Reporting Ye	ear is less than \$500, proceed to
2. INCOME EARN	IED THIS REPORTING YEAR			
S0 - \$499*		\$1,001 - \$10,000	0,001 - \$100,000	OVER \$100,000
*If aggregate in Rep	porting Year is less than \$500	, proceed to Section 5.		
	orting Year is more than \$500			
NAME OF BUSINE	SS ENTITY/TRUST/GOVERN	AL AGENCY & DESCRIPTION IMENTAL AGENCY and Local Agency Formation Cor		
ADDRESS 375 Beale Street Su	uite 700. San Francisco Ca 94	105, and 777 North First Stree	et. Suite 410. San Jos	e, CA 95112
	S ENTITY/TRUST/GOVERN			····
Proprietorship	Partnership	LLC.	□ c	orporation
☐ Trust	X Governmental	Agency Nonprofit Org	anization	Other
		Y/TRUST/GOVERNMENTAL And Local Agency Formation Cor		
POSITION: Board	member, Commissioner			
GENERAL DESCRI	PTION OF SERVICES REND	ERED: stipend		
		OF INCOME OF \$5,000 OR MO 0 OR MORE (attach a separate		ORTING PERIOD AND IF THE
5. VERIFICATION				19
I have used all reaso information containe				the best of my knowledge the alty of perjury under the laws of
Signature(File the c	inginally signed statement wit	h the City Clerk.)	Date Signed	(month, day, year)

RECEIVED San Jose City Clerk

Page 1

Disciosure (or i dilalalali	9	JOICT OTH		Agu agod Out Clock	i age i
NAME OF ELECTER	OFFICIAL			Date of 10/15/18	Date Stamp	CITY OF SAN DFR1
Sergio Jimenez				This Filing	2018 OCT 15 PM 2: 42	JOSE FORM DERI
OFFICE HELD			PERIOD COVERED BY THIS REPORT	1 3		For Official Use Only
Councilmember			7/1/18 9/30/18 	Page of		
DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL	NAME, ADDRESS, EMPLOYER AND	OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR CONTRI	
7/1/18 rec'd	\$1,000	90 Hav	hoennauer Company wthorne Way se, CA 95110		8/18/18 City sponsored Village Fest	
3/1/18	\$2,500		Cocke Almaden Expy #100 se, CA 95118		8/18/18 City sponsored Village Fest	
3/1/18	\$500	6840 V	ere One Credit Union Via del Oro se, CA 95119		8/18/18 City sponsored Village Fest	
8/3/18	\$50	5387 1	rove Neighborhood Association Pecan Blossom Dr. sse, CA 95123		8/18/18 City sponsored Village Fest	
8/3/18	\$1,000	425 E	ose Fire Fighters, Local 230 Santa Clara St. Ste.300 ose, CA 95113		8/18/18 City sponsored Village Fest	
8/6/18	\$500	2102	Clara & San Benito Counties Trades Almaden Rd. #101 ose, CA 95125	s Council	8/18/18 City sponsored Village Fest	

Disclosure of Fundraising Report Form

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Disclosure of Fundraising Report Form

Page 2

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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8/7/18	\$50	Meriwest Credit Union P.O. Box 530953 San Jose, CA 95153	8/18/18 City sponsored Village Fest
8/8/18	\$50	Allied Universal Credit Union 2290 N, 1St. #201 San Jose, CA 95131	8/18/18 City sponsored Village Fest
7/2/18	\$50	Scarnecchia Real Estate Inc. 6273 Mountford Dr. San Jose, CA 95123	8/18/18 City sponsored Village Fest
8/13/18	\$1,000	Laborers' International Union - Local 270 2195 Fortune Dr. San Jose, CA 95131	8/18/18 City sponsored Village Fest
8/13/18	\$50	Echo Church 1172 Murphy Ave. Ste. 130 San Jose, CA 95131	8/18/18 City sponsored Village Fest
8/13/18	\$50	California Sports Center 838 Malone Rd. San Jose, CA 95125	8/18/18 City sponsored Village Fest

NOTHING TO REPORT

Signature

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Date 10/15/18

Disclosure of Fundraising Report Form

Page 3

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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9/19/18	\$500	Kaiser Permanente 75 N. Fair Oaks Ave. 4th fl Pasadena, CA 91103	8/18/18 City sponsored Village Fest

NOTHING TO REPORT

Signature

re Sergii

Date 10/15/18

INCOME AND TIME DISCLOSURE STATEMENT (San Jose Municipal Gode Chapter 12:19)

NAME (LAS Jimenez	T). (FIRST) Sergio	2010 DANEY 4 AM 11: 35	DAYTIME TELEPHONE NUMBER (408) 535-4902
REPORTING PEF 10/1/18 through			
	ing Period, how many hours	edid you spend rendering services unrelated to you spend rendering services unrelated to you spend to Section 2 below.)	your duties of office for which you earned
1. INCOME EAR	NED THIS REPORTING PE	ERIOD*	744
☐ LESS \$500	\$500 - \$1,000		0,000
*If aggregate in Re Section 5.	eporting Year is more than \$	5500, proceed to Section 2. If aggregate in Repo	orting Year is less than \$500, proceed to
2. INCOME EAR	NED THIS REPORTING YE	AR	
\$0 - \$499*	\$500 - \$1,000	\$1,001 - \$10,000	000 OVER \$100,000
*If aggregate in Re	eporting Year is less than \$5	500, proceed to Section 5.	
	porting Year is more than \$5		
	ITTY/TRUST/GOVERNMEN ESS ENTITY/TRUST/GOVE	NTAL AGENCY & DESCRIPTION OF SERVICE RINGERY AGENCY	<u> </u>
		, and Local Agency Formation Commission (LAF	FCO)
ADDRESS 375 Beale Street S	Suite 700, San Francisco Ca	94105, and 777 North First Street, Suite 410,	San Jose, CA 95112
TYPE OF BUSINE	SS ENTITY/TRUST/GOVE	RNMENTAL AGENCY:	
☐ Proprietorship	☐ Partnership	☐ LLC	Corporation
☐ Trust	X Governmen	tal Agency Nonprofit Organization	Other
GENERAL DESCR	RIPTION OF BUSINESS EN	TITY/TRUST/GOVERNMENTAL AGENCY ACT	IVITY:
		, and Local Agency Formation Commission (LAF	
POSITION: Board	member, Commissioner		
GENERAL DESCR	IPTION OF SERVICES RE	NDERED: stipend	
		CE OF INCOME OF \$5,000 OR MORE FOR TH ,000 OR MORE (attach a separate sheet if nece	
AGGNEGATETI	INCHONING IZANIO 40	,000 ON WORL (attach a Separate Sheet Friede	SSal y)
5. VERIFICATION			
		ng this statement. I have reviewed this statemen	
	ed nerein and in any attache rnia that the foregoing is t	ed schedules is true and complete. I certify und crue and correct.	ier penalty of perjury under the laws of
			1 hertes
Signature(File the	originally signed statement	with the City Clerk.)	(month, day, year)

Type or print in ink.

Amounts may be rounded to whole dollars RECEIVED

Disclosure (ot Fundraisin	ig Kep	ort Form		₿an	Jose City Clark	Page 1
NAME OF ELECTE	D OFFICIAL	*,		Date of		Data Stamp	CITY OF SAN DED4
Sergio Jimenez					1/15/19 2019 J	AN 14 AM II: 35	JOSE FORM DFR1
OFFICE HELD			PERIOD COVERED BY THIS	1	1	1	For Official Use Only
Councilmember			REPORT 10/1/18 12/31/18 TO	i –	of	ı	
DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL N	IAME, ADDRESS, EMPLOYER A	ND OCCUPATION O	F CONTRIBUTOR		OR PURPOSE OF FUNDRAISING NTRIBUTION
					5.1		

NOTHING TO REPORT

Signature Sargual

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

NAME Jim	(LAST) ienez	(FIRST) Sergio	(MIDDLE)		DAYTIME TE (408) 535-4	LEPHONE NUMBER 902
REPORTING January 1,	G PERIOD 2019 - Marcl	h 31, 2019				
			s did you spend rendering s eed to Section 2 below.)	services unrelated to y none	our duties of office for v	vhich you earned
1. INCOME	JEARNED TI	HS REPORTING P	ERIOD'			
☐ LESS:	\$500 [\$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,	000	00,000
Section 5.	, -		\$500, proceed to Section 2	. If aggregate in Repo	rting Year is less than S	\$500, proceed to
2. INCOME	EARNEDTH	HIS REPORTING Y		Karalina di Ka Karalina di Karalina di Ka		
X \$0 - \$4	.99*	\$500 - \$1,000	S1,001 - \$10,000	\$10,001 - \$100,0	00	0,000
*If aggregate	e in Reporting	Year is less than \$	500, proceed to Section 5.			
	, ,		500, proceed to Section 3.			
and the same of th			NTALAGENCY & DESCR ERNMENTAL AGENCY	iriioniopservioe	S	
ADDRESS	to d				······································	
TYPE OF BU	JSINESS EN	TITY/TRUST/GOVE	RNMENTAL AGENCY:			
☐ Proprieto	orship	Partnership	rrc		☐ Corporation	
☐ Trust		Governme	ntal Agency Nonp	orofit Organization	Other	
GENERAL D	ESCRIPTION	N OF BUSINESS E	NTITY/TRUST/GOVERNMI	ENTAL AGENCY ACT	IVITY:	
POSITION;						
GENERAL D	ESCRIPTION	N OF SERVICES R	ENDERED:			
			RCE OF INCOME OF \$5,00 5,000 OR MORE (altach a			DD AND IE THE
		AVAILE BESTEADEN	ANOVA ANIONIE (CITABILA	20-0318/(0-2)11-0-6/4/18/1-0-6-2	5860))	
5, VERIEGA	MON					7/
information o	ontained here		ing this statement. I have re ned schedules is true and co true and correct.			
Signature(F	ile the origina	illy signed statemen	with the City Clerk.)	Date Signed	9(6) 19 (month, da	y, year)

Disclosure	of	Fundr	aising	Report	Form
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Page 1

NAME OF ELECTED OFFICIAL Sergio Jimenez OFFICE HELD Councilmember PERIOD COVERED BY THIS REPORT 1/1/19 3/31/19 TO				Date of This Filing	6/1/1/1	9	Date St	amp	CITY OF SAN DFR1		
				Page	of _	1			For Official Use Only		
DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAM	E, ADDRESS	, EMPLOYER	AND OC	CUPATION (OF CONTRI	BUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION		
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									POLICE CONTINUES AND ADMINISTRATION OF THE POLICE CONTINUES AND ADMI		
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NOTHING TO REPORT

Signature

Serphy

Date 6/0/19

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

NAME (LAST) Jimenez	(FIRST) Sergio	(MIDDLE)	DAYTIME TELEPHONE NUMBER (408) 535-4902
REPORTING PERIOD April 1, 2019 - June 3			
	eriod, how many hours o er is none, please procee		ated to your duties of office for which you earned
I. INCOME EARNED	THIS REPORTING PE	(IOD)	
☐ LESS \$500	S500 - \$1,000	\$1,001 - \$10,000 \$10,00	- \$100,000 OVER \$100,000
Section 5.	_		in Reporting Year is less than \$500, proceed to
2. INCOME EARNED	THIS REPORTING YEA	iR	And the state of t
☒ \$0 - \$499*	\$500 - \$1,000	\$1,001 - \$10,000 \$10,001	- \$100,000
*If aggregate in Report	ing Year is less than \$50	0, proceed to Section 5.	
,	ng Year is more than \$50		
	/TRUST/GOVERNMEN ENTITY/TRUST/GOVER	FAL AGENCY & DESCRIPTION OF S RNMENTAL AGENCY	ERVICES:
ADDRESS	*****		14.00
TYPE OF BUSINESS I	ENTITY/TRUST/GOVER	NMENTAL AGENCY:	
☐ Proprietorship	Partnership	LLC	Corporation
Trust	Government	al Agency	tion Other
GENERAL DESCRIPT	ION OF BUSINESS ENT	TTY/TRUST/GOVERNMENTAL AGEN	CY ACTIVITY:
			White the second
POSITION:			
GENERAL DESCRIPT	ION OF SERVICES REN	IDERED:	
		E OF INCOME OF \$5,000 OR MORE 000 OR MORE (attach a separate shee	FOR THIS REPORTING PERIOD AND IF THE string recessary)
	and the state of t		Commission
5. VERIFICATION			
information contained h		d schedules is true and complete. I ce	statement and to the best of my knowledge the rtify under penalty of perjury under the laws of
Signature File the orig	inally signed statement v	Date vith the City Clerk.)	Signed (month, day, year)

Disclosure of Fundraising Report Form

Page 1

OFFICE HELD PERIOD COVERED BY THIS			Date of This Filing	7/15/19	Date Stamp	CITY OF SAN DFR1		
			Page	of		For Official Use Only		
DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL 1	NAME, ADDRESS, EMPLOYER AND C	CCUPATION C	F CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION		
4/20/19	\$450 in-kind sandwiches	3150 A	3150 Almaden Expy #100			4/20/19 City sponsored Great American Litter Pick up		
4/20/19	S200 in-kind breakfast items	450 Cu	Astrid Tromp - Coldwell Banker 450 Curie Dr, San Jose, CA 95123			4/20/19 City sponsored Great Americar, Litter Pick up		
4/20/19	\$700 in-kind hot dogs/ water	6150 C	rs, Steamfitters & Refrigeration Fitters ottle Road e, CA 95123			4/20/19 City sponsored Great American Litter Pick up		

NOTHING TO REPORT

Signature

Saf

Date 6/27/19

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

NAME (LAST) Jimenez	(FIRST) Sergio	(MIDDLE)	DAYTIME TELEPHONE NUMBER (408) 535-4902
REPORTING PERIOD April 1, 2019 - June 3			
	eriod, how many hours o er is none, please procee		ated to your duties of office for which you earned
I. INCOME EARNED	THIS REPORTING PE	(IOD)	
☐ LESS \$500	S500 - \$1,000	\$1,001 - \$10,000 \$10,00	- \$100,000 OVER \$100,000
Section 5.	_		in Reporting Year is less than \$500, proceed to
2. INCOME EARNED	THIS REPORTING YEA	iR	And the state of t
☒ \$0 - \$499*	\$500 - \$1,000	\$1,001 - \$10,000 \$10,001	- \$100,000
*If aggregate in Report	ing Year is less than \$50	0, proceed to Section 5.	
,	ng Year is more than \$50		
	/TRUST/GOVERNMEN ENTITY/TRUST/GOVER	FAL AGENCY & DESCRIPTION OF S RNMENTAL AGENCY	ERVICES:
ADDRESS	*****		14.00
TYPE OF BUSINESS I	ENTITY/TRUST/GOVER	NMENTAL AGENCY:	
☐ Proprietorship	Partnership	LLC	Corporation
Trust	Government	al Agency	tion Other
GENERAL DESCRIPT	ION OF BUSINESS ENT	TTY/TRUST/GOVERNMENTAL AGEN	CY ACTIVITY:
			White the second
POSITION:			
GENERAL DESCRIPT	ION OF SERVICES REN	IDERED:	
		E OF INCOME OF \$5,000 OR MORE 000 OR MORE (attach a separate shee	FOR THIS REPORTING PERIOD AND IF THE string recessary)
	and the state of t		Commission
5. VERIFICATION			
information contained h		d schedules is true and complete. I ce	statement and to the best of my knowledge the rtify under penalty of perjury under the laws of
Signature File the orig	inally signed statement v	Date vith the City Clerk.)	Signed (month, day, year)

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

NAME Jim	(LAST) ienez	(FIRST) Sergio	(MIDDLE)		DAYTIME TE (408) 535-4	LEPHONE NUMBER 902
REPORTING January 1,	G PERIOD 2019 - Marcl	h 31, 2019				
			s did you spend rendering s eed to Section 2 below.)	services unrelated to y none	our duties of office for v	vhich you earned
1. INCOME	JEARNED TI	HS REPORTING P	ERIOD'			
☐ LESS:	\$500 [\$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,	000	00,000
Section 5.	, -		\$500, proceed to Section 2	. If aggregate in Repo	rting Year is less than S	\$500, proceed to
2. INCOME	EARNEDTH	HIS REPORTING Y		Karalina di Ka Karalina di Karalina di Ka		
X \$0 - \$4	.99*	\$500 - \$1,000	S1,001 - \$10,000	\$10,001 - \$100,0	00	0,000
*If aggregate	e in Reporting	Year is less than \$	500, proceed to Section 5.			
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and the same of th			NTALAGENCY & DESCR ERNMENTAL AGENCY	iriioniopservioe	S	
ADDRESS	to d				······································	
TYPE OF BU	JSINESS EN	TITY/TRUST/GOVE	RNMENTAL AGENCY:			
☐ Proprieto	orship	Partnership	rrc		☐ Corporation	
☐ Trust		Governme	ntal Agency Nonp	orofit Organization	Other	
GENERAL D	ESCRIPTION	N OF BUSINESS E	NTITY/TRUST/GOVERNMI	ENTAL AGENCY ACT	IVITY:	
POSITION;						
GENERAL D	ESCRIPTION	N OF SERVICES R	ENDERED:			
			RCE OF INCOME OF \$5,00 5,000 OR MORE (altach a			DD AND IE THE
		AVAILE BESTEADEN	ANOVA ANIONIE (CITABILA	20-0318/(0-2)11-0-6/4/18/1-0-6-2	5860))	
5, VERIEGA	MON					7/
information o	ontained here		ing this statement. I have re ned schedules is true and co true and correct.			
Signature(F	ile the origina	illy signed statemen	with the City Clerk.)	Date Signed	9(6) 19 (month, da	y, year)

Disclosure	of	Fundr	aising	Report	Form
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Page 1

NAME OF ELECTED OFFICIAL Sergio Jimenez				Date of 6/101/19 This Filing			Date Stamp		CITY OF SAN DFR1		
OFFICE HELD Councilmember	-	l RE	ERIOD COVER EPORT 1/19	3/31/19 3/31/19		Page 1 1					For Official Use Only
DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAM	E, ADDRESS	, EMPLOYER	AND OC	CUPATION (OF CONTRI	BUTOR	DESCRIPTION	OF EVENT OR CONTRI	PURPOSE OF FUNDRAISING BUTION
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									POLICE CONTINUES AND ADMINISTRATION OF THE POLICE CONTINUES AND ADMI		
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NOTHING TO REPORT

Signature

Serphy

Date 6/0/19

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

NAME	(LAST) Jimenez	(FIRST) Sergio	(MIDDLE)			DAYTIME TELEPHONE NUI (408) 535-4902	MBER
	ING PERIOD through 9/30/1	9					
			s did you spend rendering s reed to Section 2 below.)	services unrelated to y none	our duties	of office for which you earne	ed —
11.410(0)	ME EARNED	THISTREPORTING	ERIODY				
LES	SS \$500	\$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100	,000 [OVER \$100,000	
*If aggreg Section 5		ng Year is more than	\$500, proceed to Section 2.	. If aggregate in Repo	orting Year	is less than \$500, proceed t	0
2. INCO	ME EARNED	This reporting y	EAR				
\$0 -	\$499*	\$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,0	000 [OVER \$100,000	
*If aggreg	jate in Reportii	ng Year is less than \$	500, proceed to Section 5.				
If aggrega	ate in Reportin	g Year is more than \$	500, proceed to Section 3.				
			NTALAGENCY & DESCR	iptionofservige	\$		
1			ERNMENTAL AGENCY i), and Local Agency Forma	ation Commission (LAI	FCO)		
ADDRES		700. San Francisco C	a 94105, and 777 North Fi	irst Street. Suite 410.	San Jose.	CA 95112	
			ERNMENTAL AGENCY:				
☐ Propr	rietorship	☐ Partnership	D LTC		Corp	ooration	
│		X Governme	ntal Agency	orofit Organization		Other	
GENERA	L DESCRIPTION	ON OF BUSINESS E	NTITY/TRUST/GOVERNME	ENTAL AGENCY ACT	TVITY:		
Association	on of Bay Area	Governments (ABAG	i), and Local Agency Forma	ntion Commission (LA	FCO)		
POSITION	N: Board mem	ber, Commissioner					
GENERAI	L DESCRIPTIO	ON OF SERVICES RE	ENDERED: stipend				
			RCE OF INCOME OF \$5,00 5,000 OR MORE (altach as			RTING PERIOD AND IF THE	. 1
Company of the Compan				Marie Company			
5 VERIB	EATION						
informatio	n contained he		ned schedules is true and c			ne best of my knowledge the By of perjury under the laws	s of
Signature	(File the origin	nally signed statemen	t with the City Clerk.)	Date Signed		(month, day, year)	

Disclosure of Fundraising Report Form

AMOUNT

CONTRIBUTED

\$1,000

\$2,000

\$1,000

\$100

\$500

\$500

NAME OF ELECTED OFFICIAL

Sergio Jimenez OFFICE HELD

Councilmember

DATE OF

SOLICITATION

7/26/19

9/4/19

7/25/19

8/15/19

8/6/19

8/14/19

g Report Form		·	NEURIVEE	Page 1
	Date of 10/15/19 This Filing	Date Stan	nposa Gily 🔓	DITY OF SAN DFR1
PERIOD COVERED BY THIS REPORT 7/1/19 9/30/19TO	Page of	2990		《 U ≮or Official Use Only
FULL NAME, ADDRESS, EMPLOYER AND O	CCUPATION OF CONTRIBUTOR	DESCRIPTION O	F EVENT OR PUR CONTRIBUTI	POSE OF FUNDRAISING ON
The Schoennauer Company 90 Hawthorne Way San Jose, CA 95110		9/7/19 City sponsored Village Fest		
Angie Cocke 3150 Almaden Expy #100 San Jose, CA 95118		9/7/19 City sponsored Village Fest		
Premiere One Credit Union 6840 Via del Oro San Jose, CA 95119		9/7/19 City sponsored Village Fest		
Oak Grove Neighborhood Association 5387 Pecan Blossom Dr. San Jose, CA 95123		9/7/19 City sponsored Village Fest		
San Jose Fire Fighters, Local 230 425 E. Santa Clara St. Ste.300 San Jose, CA 95113		9/7/19: City sponsored Village Fest		
		 	:	

9/7/19

City sponsored

Village Fest

OTHING TO REPORT	Signature	Ser/	950000
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Santa Clara & San Benito Counties Trades Council

2102 Almaden Rd. #101

San Jose, CA 95125

Date 10/11/19

Disclosure of Fundraising Report Form

Page 2

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
7/25/19	\$100	Pedron's Storage P.O. Box 53223 San Jose, CA 95153	9/7/19 City sponsored Village Fest
3/15/19	\$100	Meriwest Credit Union P.O. Box 530953 San Jose, CA 95153	9/7/19 City sponsored Village Fest
3/16/19	\$100	Scarnecchia Real Estate Inc. 6273 Mountford Dr. San Jose, CA 95123	9/7/19 City sponsored Village Fest
3/14/19	\$1,000	Laborers' International Union - Local 270 2195 Fortune Dr. San Jose, CA 95131	9/7/19 City sponsored Village Fest
7/30/19	\$100	Carole Holcomb 5755 Cohasset Wy. San Jose, CA 95123	9/7/19 City sponsored Village Fest
3/30/19	\$2,000	California Waste Solutions, Inc. 1120 Berryessa Rd. San Jose, CA 95133	9/7/19 City sponsored Village Fest
8/21/19	\$100	Bernal Partners dba Supercuts 1475 Saratoga Ave. Ste. 250 San Jose, CA 95129	9/7/19 City sponsored Village Fest

NOTHING TO REPORT

Signature

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Date 10/11/19

Disclosure of Fundraising Report Form

Page 3

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PUI CONTRIBUT	RPOSE OF FUNDRAISING
27/19	\$250	Astrid Tromp-Koerse 450 Curie Dr. San Jose, CA 95123	9/7/19 City sponsored Village Fest	
3/19	\$2,500	L&L Franchise 931 University Ave. Ste. 202 Honolulu, HI 96826	9/7/19 City Sponsored Village Fest	
	·			- marketing 20th -
NOTHING TO	REPORT	Signature Sa	Date	10/11/19



Healthier Kids Foundation 4040 Moorpark Avenue, Suite 100 San Jose, CA 95117 408.564.5114 www.hkidsf.org

Invoice

Invoice Date: 10.11.19

Bill To: Council Member Jimenez

Description

Amount

Safe from the Start! Sponsorship

\$1,000.00

Total

\$1,000.00

Signature:

Please make checks payable to:

Healthier Kids Foundation 4040 Moorpark Ave., Suite 100 San Jose, CA 95117

Thank You!

For questions, please contact Marissa Hacker at Marissah@hkidsf.org or 408.564.5114 x241.

Healthier Kids Foundation is a 501(c)(3) nonprofit, Tax ID No: 77-0545774.

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

2022 APR 20 PM 2: 59

NAME (LAST) Jimenez	(FIRST) Sergio	(MIDDLE)	DAYTIME TELEPHONE NUMBER (408) 535-4902
REPORTING PERIOD 1/1/22 - 3/31/22			
During the Reporting P Income? (If your answe	eriod, how many hours of the ris none, please proces	did you spend rendering services uned to Section 2 below.)	nrelated to your duties of office for which you earned
1. INCOME EARNED	THIS REPORTING PE	RIOD*	有些的事情,这种情况,但是
LESS \$500	X \$500 - \$1,000	S1,001 - \$10,000 S10	0,001 - \$100,000
*If aggregate in Report Section 5.	ing Year is more than \$5	500, proceed to Section 2. If aggree	gate in Reporting Year is less than \$500, proceed to
2. INCOME EARNED	THIS REPORTING YEA	AR	
\$0 - \$499*	× \$500 - \$1,000 [\$1,001 - \$10,000 \$10,	001 - \$100,000
		00, proceed to Section 5.	
	-	00, proceed to Section 3.	
		TAL AGENCY & DESCRIPTION C	OF SERVICES
	ENTITY/TRUST/GOVE ATION AGENCY/ LOCA	RNMENTAL AGENCY AL AGENCY FORMATION COMISS	SION
ADDRESS 3331 North First Stree	t, Building B-1 San Jose	, CA 95134-1927/ 777 North First S	treet, Suite 410 San Jose, CA 95112
TYPE OF BUSINESS	ENTITY/TRUST/GOVER	RNMENTAL AGENCY:	
Proprietorship	Partnership	LLC	Corporation
☐ Trust	X Governmen	tal Agency Nonprofit Orga	onization Other
CENERAL DESCRIPT	TON OF BURINESS EN	TITY/TRUST/GOVERNMENTAL A	GENCY ACTIVITY:
MANDATED AGENCIE		TITT/TROST/GOVERNMENTAL A	OLIVOT //CHIVITT.
POSITION: DIRECTO	OR/ COMMISSIONER		
	ION OF SERVICES RE	NDERED: PER DIEM PAYMENT	'S
4. LIST EACH REPOR AGGREGATE IN RI	RTABLE SINGLE SOUR EPORTING YEAR IS \$5	CE OF INCOME OF \$5,000 OR MO ,000 OR MORE (attach a separate	ORE FOR THIS REPORTING PERIOD AND IF THE sheet if necessary)
5. VERIFICATION			
information contained	able diligence in preparin herein and in any attach a that the foregoing is	ed schedules is true and complete.	this statement and to the best of my knowledge the I certify under penalty of perjury under the laws of
Signature(File the ori	ginally signed statement	with the City Clerk.)	Date Signed4/20/22 (month, day, year)

Type or print in ink.

Amounts may be rounded to whole dollars.

San Jose City Clock

Page 1

Diediedare of Fariarationing Report Form					Can bose City Clerk								
NAME OF ELECTED	OFFICIAL					Date of	4/20/22		Au. /	Date Stamp		CITY OF SAN	DES
Sergio Jimenez						This Filing	4/20/22	202	22 APR 20	PM 2:	59	CITY OF SAN JOSE FORM	and the same of the same of the same of the
OFFICE HELD			PERIOD CO	VERED BY THIS		1	1					For Officia	l Use Only
Councilmember			REPORT 1/1/22	3/31/22 TO		Page	of						
DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL N	IAME, ADDR	ESS, EMPLOYER	AND OC	CCUPATION	OF CONTRIB	UTOR	DESCRI	PTION OF E	VENT OR F	PURPOSE OF FUN BUTION	DRAISING

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	1	L											

NOTHING TO REPORT

Disclosure of Fundraising Report Form

Signature

Saylor

Date 4/20/22

Biodiodalo di l'allaratol	ng Report Form	San Jose City Clerk Page 1				
NAME OF ELECTED OFFICIAL Sergio Jimenez		Date of 7/21/22 This Filing	Date Stamp OTC 11/2 2022 JUL 2 PH 3: 25	CITY OF SAN DFR1		
OFFICE HELD Councilmember	PERIOD COVERED BY THIS REPORT 4/1/22 6/30/22 TO	Page of	711 3, 28	For Official Use Only		
DATE OF AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND	O OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PL CONTRIBU			
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		× *	Ŀ			
				2		

NOTHING TO REPORT

Signature

Date 7/21/22

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

NAME (LAST) Jimenez	(FIRST) Sergio	(MIDDLE)		DAYTME 42 LE PHONE (408) 535-4902
REPORTING PERIOD 4/1/22 to 6/30/22				
During the Reporting Police Income? (If your answer			services unrelated to you	r duties of office for which you earned
1. INCOME EARNED				
☐ LESS \$500	× \$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,00	0 OVER \$100,000
*If aggregate in Reporti Section 5.	ng Year is more than \$	500, proceed to Section 2	. If aggregate in Reporti	ng Year is less than \$500, proceed to
2. INCOME EARNED	THIS REPORTING YE	AR		
S0 - \$499*	\$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100,000	OVER \$100,000
*If aggregate in Reporti	ng Year is less than \$5	500, proceed to Section 5.		
If aggregate in Reportin	g Year is more than \$5	500, proceed to Section 3.		·
		NTAL AGENCY & DESCR	RIPTION OF SERVICES	
NAME OF BUSINESS I VALLEY TRANSPORTA		RNMENTAL AGENCY AL AGENCY FORMATION	COMISSION	
ADDRESS 3331 North First Street,	Building B-1 San Jose	e, CA 95134-1927/ 777 No	rth First Street, Suite 410) San Jose, CA 95112
TYPE OF BUSINESS E	NTITY/TRUST/GOVE	RNMENTAL AGENCY:		
☐ Proprietorship	☐ Partnership	LLC]	Corporation
☐ Trust	X Governmen	ntal Agency Nonp	profit Organization [Other
GENERAL DESCRIPTI	ON OF BUSINESS EN	ITITY/TRUST/GOVERNM	ENTAL AGENCY ACTIV	ITY:
MANDATED AGENCIE		THE PROPERTY OF THE PROPERTY O	ENTALMOLIVOTATION	
POSITION: DIRECTO	R/ COMMISSIONER			
GENERAL DESCRIPTI	ON OF SERVICES RE	NDERED: PER DIEM F	PAYMENTS	
		CE OF INCOME OF \$5,00 5,000 OR MORE (attach a		REPORTING PERIOD AND IF THE cary)
5. VERIFICATION				
I have used all reasona	erein and in any attach	ed schedules is true and o	reviewed this statement complete. I certify unde	and to the best of my knowledge the repealty of perjury under the laws of
		To Carlotte Carlot		E /01 /00
Signature(File the ofig	inally signed statemen	with the City Clerk.)	Date Signed	7/21/22 (month, day, year)

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

NAME (LAST) Jimenez	(FIRST) Sergio	(MIDDLE)		DAYTIME TELEPHONE NUMBER (408) 535-4902
REPORTING PERIO 7/1/22 - 9/30/22	D			
		s did you spend rendering s eed to Section 2 below.) _	services unrelated to 10+	your duties of office for which you earned
1. INCOME EARNE	D THIS REPORTING P	ERIOD*		
☐ LESS \$500	× \$500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100	0,000 OVER \$100,000
*If aggregate in Repo Section 5.	rting Year is more than S	\$500, proceed to Section 2.	. If aggregate in Rep	orting Year is less than \$500, proceed to
2. INCOME EARNE	D THIS REPORTING Y	EAR		
S0 - \$499*	S500 - \$1,000	\$1,001 - \$10,000	\$10,001 - \$100	,000 OVER \$100,000
*If aggregate in Repo	orting Year is less than \$	500, proceed to Section 5.		
		500, proceed to Section 3.	And the second s	
		NTAL AGENCY & DESCR	RIPTION OF SERVIC	ES
	S ENTITY/TRUST/GOVI TATION AGENCY/ LOC	CAL AGENCY FORMATION	COMISSION	
ADDRESS 3331 North First Stre	et, Building B-1 San Jos	e, CA 95134-1927/ 777 Nor	rth First Street, Suite	410 San Jose, CA 95112
TYPE OF BUSINESS	S ENTITY/TRUST/GOVE	RNMENTAL AGENCY:		
☐ Proprietorship	☐ Partnership	LLC		Corporation
☐ Trust	X Governme	ntal Agency Nonp	profit Organization	Other
		NTITY/TRUST/GOVERNME	ENTAL AGENCY AC	TIVITY:
MANDATED AGENC		<u> </u>	<u> </u>	and a late of the same
POSITION: DIRECT	OR/ COMMISSIONER			
GENERAL DESCRIF	TION OF SERVICES R	ENDERED: Stipends		
		RCE OF INCOME OF \$5,00 5,000 OR MORE (attach a		HIS REPORTING PERIOD AND IF THE cessary)
5. VERIFICATION				
information contained	nable diligence in prepar I herein and in any attac iia that the foregoing is	hed schedules is true and o	reviewed this statement complete. I certify u	ent and to the best of my knowledge the nder penalty of perjury under the laws of
2	5 //		D-4-0'	10/4/22
Signature(File the o	riginally signed statemen	with the City Clerk.)	Date Signe	(month, day, year)

RECEIVED San Jose City Clerk

Page 1

Disclosure of Fundraising Report Form

Sergio Jime OFFICE HELD Councilmember	enez	PERIOD COVERED BY THIS REPORT 7/1/22 TO 9/30/22	Date of	2022 9 CT 4 AM : 3	CITY OF SAN DFR1 For Official Use Only	
DATE OF AMOUNT CONTRIBUTED FULL NAME, ADDRESS, EMPLOYER AND O			CCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION		
8/31/22	\$2,500	Voler Strategic Advisors 2066 The Alameda, San Jose, CA 95126		Sister Cities International		
9/20/22	\$2,500	Rotten Robbie 3090 Monterey Rd, San Jose, CA 95111		Sister Cities International		
9/15/22	\$2,500	GTL Enterprises LLC 300 E Gish RdSan JoseCA95112		Sister Cities International		
9/22/22	\$500	Robson Homes 2185 The Alameda San Jose, CA 95126		Sister Cities International		
9/2/22	\$2,500	Kaiser Permanente 19000 Homestead Rd. Cupertino, CA 95014	b.	Sister Cities International		
9/15/22	\$1,000	Gary Kremen San Jose, CA 95125		Sister Cities International		

Behested payments that total \$5,000 or more per calendar year may also need to be reported on a form 803 within 30 days of the date they are made.

	 Signature:	5.//	DATE: (O/14)
NOTHING TO REPORT	olgitature	0000	

City of San José Form DFR-1 (Jan 2020)

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
9/16/22	\$5,000	LiUNA Laborers Local 270 2195 Fortune Dr, San Jose, CA 95131	Sister Cities International
9/20/22	\$5,000	AECOM 100 W San Fernando St #200 San Jose, CA 95113	Sister Cities International
9/20/22	\$2,500	Westfield Shopping Centers 2049 Century Park East Los Angeles, CA 90067	Sister Cities International
9/20/22	\$1,000	City of San Jose, District 3 Office 200 E Santa Clara St San Jose, CA 95113	Sister Cities International
9/26/22	\$500	Green Team 1333 Old Oakland Rd, San Jose, CA 95112	Sister Cities International
9/20/22	\$2,500	Santa Clara Valley Water 5750 Almaden Expy San Jose, CA 95118	Sister Cities International
9/20/22	\$1,000	Republic Services 1601 Dixon Landing Rd Milpitas, CA 95035	Sister Cities International

Behested payments that total \$5,000 or more per calendar year may also need to be reported on a form 803 within 30 days of the date they are made.

NOTHING TO REPORT	Signature:	- Sayles	DATE:	10/14/22
			Ci	tu of Can José Form DED 1 / Jan 2

City of San José Form DFR-1 (Jan 2020)

Disclosure of Fundraising Report Form

Page 3

DATE OF SOLICITATION	AMOUNT CONTRIBUTED	FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR	DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
9/22/22	\$250	City of San José District 9 Office 200 E Santa Clara St San Jose, CA 95113	Sister Cities International
			p p

Behested payments that total \$5,000 or more per calendar year may also need to be reported on a form 803 within 30 days of the date they are made.

	Signature:	5	DATE:	1911/22
	Cignatare.		DATE.	119122
NOTHING TO REPORT				