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

NAME (LAST)       (FIRST)       (MIDDLE)       DAYTIME TELEPHONE NUMBER
Jimenez          Sergio          Daytime Telephone Number: (408) 535-4902

REPORTING PERIOD: December 1, 2016 to December 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.)

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:
   - [x] $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: ___________________________  Date Signed: January 17, 2017

   (File the originally signed statement with the City Clerk.)
### Disclosure of Fundraising Report Form

**NAME OF ELECTED OFFICIAL**
Sergio Jimenez

**OFFICE HELD**
Councilmember, District 2

**PERIOD COVERED BY THIS REPORT**
10-1-16 to 12-31-16

**DATE OF SOLICITATION** | **AMOUNT CONTRIBUTED** | **FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR** | **DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION**
--- | --- | --- | ---
11-3-16 | $5,000 |  First 5 Santa Clara County  
4000 Moorpark Ave. #200  
San José CA 95117 | 12/3/16 City Sponsored Gun Buy Back
REC'D 11-9-16 | $500 | LYFT  
2300 Harrison St.  
San Francisco, CA 94110 | 5/28/16 City Sponsored Future Roots
REC'D 11-9-16 | $500 | LYFT  
2300 Harrison St.  
San Francisco, CA 94110 | 8/12/16 City Sponsored Indian Flag Raising

**NOTHING TO REPORT □**

**Signature**

**Date 1/17/17**
INCOME AND TIME DISCLOSURE STATEMENT  
(San Jose Municipal Code Chapter 12.19)

NAME  
Jimenez Sergio

REPORTING PERIOD 
January 1, 2017 - 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.) 
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: [Signature]

Date Signed: [4/11/17] (month, day, year)

(File the originally signed statement with the City Clerk.)
NAME OF ELECTED OFFICIAL
Sergio Jimenez

OFFICE HELD
Councilmember

DATE OF FILING
4-14-15

PERIOD COVERED BY THIS REPORT
1/1/2017 TO 3/31/2017

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

Date 4/11/17

City of San José Form DFR-1 (Nov/2010)
**NAME** (LAST) (FIRST) (MIDDLE)
Jimenez Sergio

**REPORTING PERIOD**
April 1, 2017 - 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.)

<table>
<thead>
<tr>
<th>Income Earned This Reporting Period</th>
<th>( \square ) LESS $500</th>
<th>( \square ) $500 - $1,000</th>
<th>( \square ) $1,001 - $10,000</th>
<th>( \square ) $10,001 - $100,000</th>
<th>( \square ) OVER $100,000</th>
</tr>
</thead>
</table>

*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.

**Income Earned This Reporting Year**

<table>
<thead>
<tr>
<th>Income Earned This Reporting Year</th>
<th>( \square ) $0 - $499*</th>
<th>( \square ) $500 - $1,000</th>
<th>( \square ) $1,001 - $10,000</th>
<th>( \square ) $10,001 - $100,000</th>
<th>( \square ) OVER $100,000</th>
</tr>
</thead>
</table>

*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.

**Business Entity/Trust/Governmental Agency & Description of Services**

NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY

ADDRESS

**Type of Business Entity/Trust/Governmental Agency:**

\( \square \) Proprietorship \( \square \) Partnership \( \square \) LLC \( \square \) Corporation

\( \square \) Trust \( \square \) Governmental Agency \( \square \) Nonprofit Organization \( \square \) Other

**General Description of Business Entity/Trust/Governmental Agency Activity:**

**Position:**

**General Description of Services Rendered:**

**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)

**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: [Signature]
Date Signed: 7/19/17 (month, day, year)

(File the originally signed statement with the City Clerk.)
<table>
<thead>
<tr>
<th>DATE OF SOLICITATION</th>
<th>AMOUNT CONTRIBUTED</th>
<th>FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR</th>
<th>DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/13/2017</td>
<td>$500</td>
<td>Kaiser Foundation Health Plan 75 N. Fair Oaks Ave. 4th Fl. Pasadena, CA 91103</td>
<td>4/22/2017 City sponsored Great American Litter PickUp</td>
</tr>
</tbody>
</table>

NOTHING TO REPORT □  
Signature: [Signature]

Date: 7/19/17  
City of San José Form DFR-1 (Nov/2010)
INCOME AND TIME DISCLOSURE STATEMENT
(San Jose Municipal Code Chapter 12.19)

NAME (LAST) (FIRST) (MIDDLE) DAYTIME TELEPHONE NUMBER
Jimenez Sergio (408) 535-4902

REPORTING PERIOD
July 1, 2017 - September 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.) 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 more than $500, proceed to Section 2. If aggregate in Reporting Year is less than $500, proceed to Section 5.

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
(Date Signed 10/16/17 (month, day, year)

(File the originally signed statement with the City Clerk.)
Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL
Sergio Jimenez

OFFICE HELD
Councilmember

PERIOD COVERED BY THIS REPORT
7/1/17 9/30/17

Date of 10/13/17
This Filing

DATE OF SOLICITATION | AMOUNT CONTRIBUTED | FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR | DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION
---|---|---|---
9/18/17 | $500 | The Schoenauer Company 90 Hawthorne Wy. San Jose, CA 95110 | 10/14/17 City sponsored Village Fest

9/18/17 | $2,500 | Angie Cocke Century 21 M&M and Associates 3150 Almaden Expressway, Suite 100, San Jose, CA 95118 | 10/14/17 City sponsored Village Fest

9/18/17 | $1,000 | Premier One Credit Union 6640 Via del Oro San Jose, CA 95119 | 10/14/17 City sponsored Village Fest

9/18/17 | $100 | Pedron's Storage P.O. Box 53223 San Jose, CA 95153 | 10/14/17 City sponsored Village Fest

9/18/17 | $1,000 | Hunter Storm LLC 10121 Miller Ave. Ste. 200 Cupertino, CA 95014 | 10/14/17 City sponsored Village Fest

9/30/17 | $110 in-kind tickets | San Jose Barracuda 525 W. Santa Clara St. San Jose, CA 95113 | 10/14/17 City sponsored Village Fest

NOTHING TO REPORT □

Signature

Date 10/13/17

City of San José Form DFR-1 (Nov/2010)
<table>
<thead>
<tr>
<th>DATE OF SOLICITATION</th>
<th>AMOUNT CONTRIBUTED</th>
<th>FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR</th>
<th>DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/25/17</td>
<td>$200 in-kind hot dogs</td>
<td>San Jose Police Officers Association 8/25/17 1151 N 4th St. San Jose, CA 95112</td>
<td>8/25/17 City sponsored D2 Movie Night</td>
</tr>
<tr>
<td>9/18/17</td>
<td>$150 in-kind gift cards</td>
<td>In-N-Out Burger 10/14/17 5611 Santa Teresa San Jose, CA 95123</td>
<td>10/14/17 City sponsored Village Fest</td>
</tr>
<tr>
<td>9/27/17</td>
<td>$280 in-kind tickets</td>
<td>San Jose Earthquakes 10/14/17 1123 Coleman Ave. San Jose, CA 95110</td>
<td>10/14/17 City sponsored Village Fest</td>
</tr>
<tr>
<td>9/29/17</td>
<td>$2,5000</td>
<td>Plumbers Steam Fitters &amp; Refrigeration Fitters Local 393 10/14/17 6150 Cottle Rd. San Jose, CA 95123</td>
<td>10/14/17 City sponsored Village Fest</td>
</tr>
<tr>
<td>9/18/17</td>
<td>$50</td>
<td>Carole Holcombe 10/14/17 5755 Cohasset Wy. San Jose, CA 95123</td>
<td>10/14/17 City sponsored Village Fest</td>
</tr>
<tr>
<td>9/18/17</td>
<td>$50</td>
<td>Amanda Newlove 10/14/17 5671 Santa Teresa Blvd #103 San Jose, California 95153</td>
<td>10/14/17 City sponsored Village Fest</td>
</tr>
</tbody>
</table>

NOTHING TO REPORT ☐

Signature

Date 10/13/17

City of San José Form DFR-1 (Nov/2010)
INCOME AND TIME DISCLOSURE STATEMENT
(San Jose Municipal Code Chapter 12.19)

<table>
<thead>
<tr>
<th>NAME (LAST)</th>
<th>Jimenez</th>
</tr>
</thead>
<tbody>
<tr>
<td>(FIRST)</td>
<td>Sergio</td>
</tr>
<tr>
<td>(MIDDLE)</td>
<td></td>
</tr>
<tr>
<td>DAYTIME TELEPHONE NUMBER</td>
<td>(408) 535-4902</td>
</tr>
</tbody>
</table>

REPORTING PERIOD
October 1, 2017 - December 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.)

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
   Association of Bay Area Governments (ABAG), Local Agency Formation Commission of Santa Clara County (LAFCO)

   ADDRESS
   375 Beale St, Ste 700 San Francisco, CA 95113, 777 North First Street, Suite 410 San Jose, CA 95112

   TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:
   □ Proprietorship □ Partnership □ LLC □ Corporation
   □ Trust □ Governmental Agency □ Nonprofit Organization □ Planning/ research coalition □ Other

   GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:
   Planning/ research coalition of local governments, state mandated agency

   POSITION:
   Board member

   GENERAL DESCRIPTION OF SERVICES RENDERED:
   per diem payments

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: [Signature]
   Date Signed: [11/12/18] (month, day, year)

   (File the originally signed statement with the City Clerk.)
# Disclosure of Fundraising Report Form

**NAME OF ELECTED OFFICIAL**
Sergio Jimenez

**OFFICE HELD**
Councilmember

**PERIOD COVERED BY THIS REPORT**
10/1/17 \to 12/31/17

**DATE OF SOLICITATION**

<table>
<thead>
<tr>
<th>DATE OF SOLICITATION</th>
<th>AMOUNT CONTRIBUTED</th>
<th>FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR</th>
<th>DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/1/17</td>
<td>$500</td>
<td>Kaiser Permanente 75 N. Fair Oaks Ave. 4th Fl Pasadena, CA 91103</td>
<td>6/10/17 City sponsored Summer Fest</td>
</tr>
<tr>
<td>10/1/17</td>
<td>$500</td>
<td>Kaiser Permanente 75 N. Fair Oaks Ave. 4th Fl Pasadena, CA 91103</td>
<td>10/14/17 City sponsored Village Fest</td>
</tr>
<tr>
<td>10/1/17</td>
<td>$500</td>
<td>The Core Companies 470 S. Market St. San Jose, CA 95113</td>
<td>10/14/17 City sponsored Village Fest</td>
</tr>
<tr>
<td>10/1/17</td>
<td>$1,000</td>
<td>Republic Services 18500 N. Allied Wy. Phoenix, AZ 85054</td>
<td>10/14/17 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/11/17</td>
<td>$623.94</td>
<td>Ash Kalra 96 Rooster Ct. San Jose, CA 95136</td>
<td>8/11/17 City sponsored Indian Flag Raising</td>
</tr>
</tbody>
</table>

**Amounts may be rounded to whole dollars.**

**NOTHING TO REPORT □**

**Signature**

**Date** 11/2/18

City of San José Form DFR-1 (Nov/2010)
INCOME AND TIME DISCLOSURE STATEMENT  
(San Jose Municipal Code Chapter 12.19)

<table>
<thead>
<tr>
<th>NAME (LAST)</th>
<th>(FIRST)</th>
<th>(MIDDLE)</th>
<th>DAYTIME TELEPHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jimenez</td>
<td>Sergio</td>
<td></td>
<td>2018 APR 19 (09:20)</td>
</tr>
</tbody>
</table>

REPORTING PERIOD  
January 1, 2018 - March 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.)

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  
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

ADDRESS  
375 Beale Street Suite 700, San Francisco Ca 94105, and 777 North First Street, Suite 410, San Jose, CA 95112

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:  
- [ ] Proprietorship  
- [ ] Partnership  
- [ ] LLC  
- [ ] Corporation  
- [ ] Trust  
- [ ] Governmental Agency  
- [ ] Nonprofit Organization  
- [ ] ABAG, LAFCO

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:  
ABAG, LAFCO

POSITION:  
Board member, Commissioner

GENERAL DESCRIPTION OF SERVICES RENDERED:  
Per diem payments

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  
(Date the originally signed statement with the City Clerk.)

Date Signed  
(4/13/18) (month, day, year)
## Disclosure of Fundraising Report Form

**NAME OF ELECTED OFFICIAL**
Sergio Jimenez

**OFFICE HELD**
Councilmember

**PERIOD COVERED BY THIS REPORT**
1/1/18 TO 3/31/18

**DATE OF SOLICITATION** | **AMOUNT CONTRIBUTED** | **FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR** | **DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION**
--- | --- | --- | ---
3/15/18 | $25 in-kind | Vitality Bowls 5660 Cottle Rd. San Jose, CA 95123 | 4/21/18 City sponsored Great American Litter Pick up

3/15/18 | $200 in-kind | Yogurtland 5638 Cottle Rd #10 San Jose, CA 95123 | 4/21/18 City sponsored Great American Litter Pick up

3/15/18 | $100 in-kind | Julio's Fresh Mex 5978 Silver Creek Valley Rd #25 San Jose, CA 95138 | 4/21/18 City sponsored Great American Litter Pick up

3/15/18 | $50 in-kind | Costco 6898 Raleigh Rd San Jose, CA 95119 | 4/21/18 City sponsored Great American Litter Pick up

3/15/18 | $150 in-kind | New Seasons Market 5667 Silver Creek Valley Rd. San Jose, CA 95138 | 4/21/18 City sponsored Great American Litter Pick up

**NOTHING TO REPORT □**

**Signature**

**Date** 4/16/18

City of San José Form DFR-1 (Nov/2010)
INCOME AND TIME DISCLOSURE STATEMENTS
(San Jose Municipal Code Chapter 12.19) San Jose City Clerk

NAME (LAST) (FIRST) (MIDDLE)
Jimenez Sergio

REPORTING PERIOD
April 1, 2018 to June 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.)

1. INCOME EARNED THIS REPORTING PERIOD*

<table>
<thead>
<tr>
<th>Choice</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $499*</td>
<td>$500 - $1,000</td>
</tr>
</tbody>
</table>

*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

<table>
<thead>
<tr>
<th>Choice</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>$0 - $499*</td>
<td>$500 - $1,000</td>
</tr>
</tbody>
</table>

*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
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

ADDRESS
375 Beale Street Suite 700, San Francisco Ca 94105, and 777 North First Street, Suite 410, San Jose, CA 95112

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

<table>
<thead>
<tr>
<th>Choice</th>
<th>Description</th>
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<tr>
<td>Nonprofit Organization</td>
<td></td>
</tr>
<tr>
<td>ABAG, LAFCO</td>
<td>Other</td>
</tr>
</tbody>
</table>

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:
ABAG, LAFCO

POSITION: Board member, Commissioner

GENERAL DESCRIPTION OF SERVICES RENDERED: per diem payments

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

Date Signed (month, day, year)
### Disclosure of Fundraising Report Form

**NAME OF ELECTED OFFICIAL**
Sergio Jimenez

**OFFICE HELD**
Councilmember

**PERIOD COVERED BY THIS REPORT**
4/1/18 TO 6/30/18

**DATE OF THIS FILING**
7/15/18

<table>
<thead>
<tr>
<th>DATE OF SOLICITATION</th>
<th>AMOUNT CONTRIBUTED</th>
<th>FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR</th>
<th>DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/19/18 Rec'd</td>
<td>$250</td>
<td>Plumbers, Steamfitters &amp; Refrigeration Fitters 6150 Cottle Road, San Jose, CA 95123</td>
<td>4/21/18 City sponsored Great American Litter Pick up</td>
</tr>
<tr>
<td>4/19/18</td>
<td>$50 in-kind drinks/ pastries/ fruit</td>
<td>Hellyer Christopher Neighborhood Association 101 Branham Ln, San Jose, CA 95111</td>
<td>4/21/18 City sponsored Great American Litter Pick up</td>
</tr>
<tr>
<td>5/16/18</td>
<td>$300 in-kind hot dogs/ water</td>
<td>Plumbers, Steamfitters &amp; Refrigeration Fitters 6150 Cottle Road, San Jose, CA 95123</td>
<td>6/6/18 City sponsored Viva Parks/ D2 Movie Night</td>
</tr>
<tr>
<td>4/21/18</td>
<td>$300 in-kind pastries coffee</td>
<td>Astrid Tromp Coldwell Banker 450 Curie Dr, San Jose, CA 95123</td>
<td>4/21/18 City sponsored Great American Litter Pick up</td>
</tr>
<tr>
<td>4/21/18</td>
<td>$900 in-kind BBQ sandwiches</td>
<td>Angie Cocke 3150 Almaden Expy #100, San Jose, CA 95118</td>
<td>4/21/18 City sponsored Great American Litter Pick up</td>
</tr>
<tr>
<td>6/7/18</td>
<td>$500</td>
<td>Astrid Tromp Coldwell Banker 450 Curie Dr, San Jose, CA 95123</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>4/15/18</td>
<td>$30 in-kind coffee</td>
<td>Village Oaks Starbucks 5670 Cottle Rd, San Jose, CA 95123</td>
<td>4/21/18 City sponsored Great American Litter Pick up</td>
</tr>
</tbody>
</table>

**NOTHING TO REPORT**

---

**Signature**

**Date** 7/2/18

City of San José Form DFR-1 (Nov/2010)
<table>
<thead>
<tr>
<th>NAME (LAST)</th>
<th>(FIRST)</th>
<th>(MIDDLE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jimenez</td>
<td>Sergio</td>
<td></td>
</tr>
</tbody>
</table>

REPORTING PERIOD
7/1/18 through 9/30/18

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
- [x] $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*
- [x] $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
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

ADDRESS
375 Beale Street Suite 700, San Francisco Ca 94105, and 777 North First Street, Suite 410, San Jose, CA 95112

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

- [ ] Proprietorship
- [x] Partnership
- [ ] LLC
- [ ] Corporation
- [ ] Trust
- [ ] Governmental Agency
- [ ] Nonprofit Organization
- [ ] Other

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

POSITION: Board member, Commissioner

GENERAL DESCRIPTION OF SERVICES RENDERED: stipend

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

Date Signed 10/15/18 (month, day, year)
**Disclosure of Fundraising Report Form**

**NAME OF ELECTED OFFICIAL**
Sergio Jimenez

**OFFICE HELD**
Councilmember

**PERIOD COVERED BY THIS REPORT**
7/1/18 TO 9/30/18

**DATE OF FILING**
10/15/18

<table>
<thead>
<tr>
<th>DATE OF SOLICITATION</th>
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<th>FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR</th>
<th>DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION</th>
</tr>
</thead>
</table>
| 7/1/18 rec'd          | $1,000             | The Schoennauer Company  
90 Hawthorne Way  
San Jose, CA 95110                                           | 8/18/18  
City sponsored  
Village Fest                                                 |
| 8/1/18                | $2,500             | Angie Cocke  
3150 Almaden Expy #100  
San Jose, CA 95118                                           | 8/18/18  
City sponsored  
Village Fest                                                 |
| 8/1/18                | $500               | Premiere One Credit Union  
6640 Via del Oro  
San Jose, CA 95119                                           | 8/18/18  
City sponsored  
Village Fest                                                 |
| 8/3/18                | $50                | Oak Grove Neighborhood Association  
5387 Pecan Blossom Dr.  
San Jose, CA 95123                                           | 8/18/18  
City sponsored  
Village Fest                                                 |
| 8/3/18                | $1,000             | San Jose Fire Fighters, Local 230  
425 E. Santa Clara St. Ste.300  
San Jose, CA 95113                                           | 8/18/18  
City sponsored  
Village Fest                                                 |
| 8/6/18                | $500               | Santa Clara & San Benito Counties Trades Council  
2102 Almaden Rd. #101  
San Jose, CA 95125                                           | 8/18/18  
City sponsored  
Village Fest                                                 |

**NOTHING TO REPORT □**

**Signature**

**Date** 10/15/18

City of San José Form DFR-1 (Nov/2010)
### Disclosure of Fundraising Report Form

<table>
<thead>
<tr>
<th>Date of Solicitation</th>
<th>Amount Contributed</th>
<th>Full Name, Address, Employer and Occupation of Contributor</th>
<th>Description of Event or Purpose of Fundraising Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/7/18</td>
<td>$50</td>
<td>Pedron's Storage, P.O. Box 53223, San Jose, CA 95153</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/7/18</td>
<td>$50</td>
<td>Meriwest Credit Union, P.O. Box 530953, San Jose, CA 95153</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/8/18</td>
<td>$50</td>
<td>Allied Universal Credit Union, 2290 N, 1St. #201, San Jose, CA 95131</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>7/2/18</td>
<td>$50</td>
<td>Scarnecchia Real Estate Inc., 6273 Mountford Dr., San Jose, CA 95123</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/13/18</td>
<td>$1,000</td>
<td>Laborers' International Union - Local 270, 2195 Fortune Dr., San Jose, CA 95131</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/13/18</td>
<td>$50</td>
<td>Echo Church, 1172 Murphy Ave. Ste. 130, San Jose, CA 95131</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/13/18</td>
<td>$50</td>
<td>California Sports Center, 838 Malone Rd., San Jose, CA 95125</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
</tbody>
</table>

NOTHING TO REPORT □

Signature [Signature]

Date 8/15/18

City of San José Form DFR-1 (Nov/2010)
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<tr>
<td>8/13/18</td>
<td>$50</td>
<td>New Seasons Market</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/20/18</td>
<td>$2,500</td>
<td>Plumbers, Steamfitters &amp; Refrigeration Fitters</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>9/18/18</td>
<td>$817.80</td>
<td>Ghost Management Group</td>
<td>7/11/18 City Sponsored Cannabis Roundtable</td>
</tr>
<tr>
<td>9/19/18</td>
<td>$500</td>
<td>Kaiser Permanente</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
</tbody>
</table>

NOTHING TO REPORT □

Signature

Date 10/15/18

City of San José Form DFR-1 (Nov/2010)
INCOME AND TIME DISCLOSURE STATEMENT
(San Jose Municipal Code Chapter 12.19)

<table>
<thead>
<tr>
<th>NAME</th>
<th>LAST</th>
<th>FIRST</th>
<th>MIDDLE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Jimenez</td>
<td>Sergio</td>
<td></td>
</tr>
</tbody>
</table>

REPORTING PERIOD
7/1/18 through 9/30/18

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
- [X] $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*
- [X] $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**
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

**ADDRESS**
375 Beale Street Suite 700, San Francisco Ca 94105, and 777 North First Street, Suite 410, San Jose, CA 95112

**TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:**
- [ ] Proprietorship
- [X] Partnership
- [ ] LLC
- [ ] Corporation
- [ ] Trust
- [ ] Governmental Agency
- [ ] Nonprofit Organization
- [ ] Other

**GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:**
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

**POSITION:** Board member, Commissioner

**GENERAL DESCRIPTION OF SERVICES RENDERED:** stipend

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:  
Date Signed: 10/5/18 (month, day, year)
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<td>7/1/18 rec'd</td>
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<td>The Schoennauer Company 90 Hawthorne Way San Jose, CA 95110</td>
<td>8/18/18 City sponsored Village Fest</td>
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<tr>
<td>8/1/18</td>
<td>$2,500</td>
<td>Angie Cocke 3150 Almaden Expy #100 San Jose, CA 95118</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/1/18</td>
<td>$500</td>
<td>Premiere One Credit Union 6840 Via del Oro San Jose, CA 95119</td>
<td>8/18/18 City sponsored Village Fest</td>
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<tr>
<td>8/3/18</td>
<td>$50</td>
<td>Oak Grove Neighborhood Association 5387 Pecan Blossom Dr. San Jose, CA 95123</td>
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<td>8/3/18</td>
<td>$1,000</td>
<td>San Jose Fire Fighters, Local 230 425 E. Santa Clara St. Ste.300 San Jose, CA 95113</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/6/18</td>
<td>$500</td>
<td>Santa Clara &amp; San Benito Counties Trades Council 2102 Almaden Rd. #101 San Jose, CA 95125</td>
<td>8/18/18 City sponsored Village Fest</td>
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Disclosure of Fundraising Report Form

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</tbody>
</table>

NOTHING TO REPORT □  
Signature  
Date 08/15/18

City of San José Form DFR-1 (Nov/2010)
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<tr>
<th>DATE OF SOLICITATION</th>
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<td>8/13/18</td>
<td>$50</td>
<td>New Seasons Market 2171 San Vito Cir Monterey, CA 93940</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/20/18</td>
<td>$2,500</td>
<td>Plumbers, Steamfitters &amp; Refrigeration Fitters 6150 Cottle Road San Jose, CA 95123</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
<tr>
<td>9/18/18</td>
<td>$817.80</td>
<td>Ghost Management Group 41 Discovery Irvine, CA 92618</td>
<td>7/11/18 City Sponsored Cannabis Roundtable</td>
</tr>
<tr>
<td>9/19/18</td>
<td>$500</td>
<td>Kaiser Permanente 75 N. Fair Oaks Ave. 4th fl Pasadena, CA 91103</td>
<td>8/18/18 City sponsored Village Fest</td>
</tr>
</tbody>
</table>

NOTHING TO REPORT □  
Signature  

Date 10/15/18  
City of San José Form DFR-1 (Nov/2010)
INCOME AND TIME DISCLOSURE STATEMENT
(San Jose Municipal Code Chapter 12:19)

NAME
Jimenez

(LAST) (FIRST)
Sergio

REPORTING PERIOD
10/1/18 through 12/31/18

DAYTIME TELEPHONE NUMBER
(408) 535-4902

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

*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
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

ADDRESS
375 Beale Street Suite 700, San Francisco Ca 94105, and 777 North First Street, Suite 410, San Jose, CA 95112

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:
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

POSITION:
Board member, Commissioner

GENERAL DESCRIPTION OF SERVICES RENDERED: stipend

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

Date Signed 1/14/19
(month, day, year)
# INCOME AND TIME DISCLOSURE STATEMENT
(San Jose Municipal Code Chapter 12.19)

<table>
<thead>
<tr>
<th>NAME (LAST)</th>
<th>(FIRST)</th>
<th>(MIDDLE)</th>
<th>DAYTIME TELEPHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jimenez</td>
<td>Sergio</td>
<td></td>
<td>(408) 535-4902</td>
</tr>
</tbody>
</table>

**REPORTING PERIOD**
January 1, 2019 - March 31, 2019

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

- [X] $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.
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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
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- [ ] 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**

Date Signed 9/10/19 (month, day, year)

(File the originally signed statement with the City Clerk.)
Disclosure of Fundraising Report Form

NAME OF ELECTED OFFICIAL
Sergio Jimenez

OFFICE HELD
Councilmember

PERIOD COVERED BY THIS REPORT
1/1/19 TO 3/31/19

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

Date 6/10/19

City of San José Form DFR-1 (Nov2010)
INCOME AND TIME DISCLOSURE STATEMENT  
(San Jose Municipal Code Chapter 12.19)

<table>
<thead>
<tr>
<th>NAME (LAST)</th>
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<tbody>
<tr>
<td>Jimenez</td>
<td>Sergio</td>
<td></td>
<td>(408) 535-4902</td>
</tr>
</tbody>
</table>

REPORTING PERIOD  
April 1, 2019 - June 30, 2019

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  
   (File the originally signed statement with the City Clerk.)

   Date Signed  
   (month, day, year)
<table>
<thead>
<tr>
<th>Date of Solicitation</th>
<th>Amount Contributed</th>
<th>Full Name, Address, Employer and Occupation of Contributor</th>
<th>Description of Event or Purpose of Fundraising Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/20/19</td>
<td>$450 in-kind sandwiches</td>
<td>Angie Cocke, 3150 Almaden Expy #100 San Jose, CA 95118</td>
<td>4/20/19 City sponsored Great American Litter Pick up</td>
</tr>
<tr>
<td>4/20/19</td>
<td>$200 in-kind breakfast items</td>
<td>Astrid Tromp, Coldwell Banker, 450 Curie Dr, San Jose, CA 95123</td>
<td>4/20/19 City sponsored Great American Litter Pick up</td>
</tr>
<tr>
<td>4/20/19</td>
<td>$700 in-kind hot dogs/ water</td>
<td>Plumbers, Steamfitters &amp; Refrigeration Fitters, 6150 Cottle Road, San Jose, CA 95123</td>
<td>4/20/19 City sponsored Great American Litter Pick up</td>
</tr>
</tbody>
</table>
**INCOME AND TIME DISCLOSURE STATEMENT**
(San Jose Municipal Code Chapter 12.19)

**NAME** (LAST) (FIRST) (MIDDLE) DAYTIME TELEPHONE NUMBER
Jimenez Sergio (408) 535-4902

**REPORTING PERIOD**
April 1, 2019 - June 30, 2019

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

<table>
<thead>
<tr>
<th>Amount Range</th>
<th>Selection</th>
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<tbody>
<tr>
<td>LESS $500</td>
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<tr>
<td>$500 - $1,000</td>
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<td>$10,001 - $100,000</td>
<td>[ ]</td>
</tr>
<tr>
<td>OVER $100,000</td>
<td>[ ]</td>
</tr>
</tbody>
</table>

*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

<table>
<thead>
<tr>
<th>Amount Range</th>
<th>Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $499*</td>
<td>[X]</td>
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<tr>
<td>$500 - $1,000</td>
<td>[ ]</td>
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<td>$1,001 - $10,000</td>
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<td>$10,001 - $100,000</td>
<td>[ ]</td>
</tr>
<tr>
<td>OVER $100,000</td>
<td>[ ]</td>
</tr>
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</table>

*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:**

<table>
<thead>
<tr>
<th>Selection</th>
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<tbody>
<tr>
<td>Proprietorship</td>
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<tr>
<td>Partnership</td>
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<tr>
<td>LLC</td>
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<td>Corporation</td>
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<td>Trust</td>
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<td>Governmental Agency</td>
</tr>
<tr>
<td>Nonprofit Organization</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

**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

Date Signed (month, day, year)

(File the originally signed statement with the City Clerk.)
**INCOME AND TIME DISCLOSURE STATEMENT**
(San Jose Municipal Code Chapter 12.19)

<table>
<thead>
<tr>
<th>NAME (LAST)</th>
<th>(FIRST)</th>
<th>(MIDDLE)</th>
<th>DAYTIME TELEPHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jimenez</td>
<td>Sergio</td>
<td></td>
<td>(408) 535-4902</td>
</tr>
</tbody>
</table>

**REPORTING PERIOD**

January 1, 2019 - March 31, 2019

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**

- $0 - $499
- $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:**

**Date Signed:** 9/10/19 (month, day, year)

(File the originally signed statement with the City Clerk.)
**Disclosure of Fundraising Report Form**

**NAME OF ELECTED OFFICIAL**
Sergio Jimenez

**OFFICE HELD**
Councilmember

**PERIOD COVERED BY THIS REPORT**
1/1/19 TO 3/31/19

**DATE OF FILING**
6/1/19

**DATE STAMP**

---

<table>
<thead>
<tr>
<th>DATE OF SOLICITATION</th>
<th>AMOUNT CONTRIBUTED</th>
<th>FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR</th>
<th>DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

**NOTHING TO REPORT**

**Signature**

**Date** 6/10/19

---

City of San José Form DFR-1 (Nov/2010)
INCOME AND TIME DISCLOSURE STATEMENT
(San Jose Municipal Code Chapter 12.19)

<table>
<thead>
<tr>
<th>NAME</th>
<th>(LAST)</th>
<th>(FIRST)</th>
<th>(MIDDLE)</th>
<th>DAYTIME TELEPHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jimenez</td>
<td>Sergio</td>
<td></td>
<td></td>
<td>(408) 535-4902</td>
</tr>
</tbody>
</table>

REPORTING PERIOD
7/1/19 through 9/30/19

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

<table>
<thead>
<tr>
<th>Amount</th>
<th>Box</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $499</td>
<td>$500 - $1,000</td>
</tr>
</tbody>
</table>

*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

<table>
<thead>
<tr>
<th>Amount</th>
<th>Box</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $499</td>
<td>$500 - $1,000</td>
</tr>
</tbody>
</table>

*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 RENDERED

NAME OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

ADDRESS
375 Beale Street Suite 700, San Francisco Ca 94105, and 777 North First Street, Suite 410, San Jose, CA 95112

TYPE OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY:

<table>
<thead>
<tr>
<th>Box</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proprietorship</td>
</tr>
<tr>
<td>Trust</td>
</tr>
</tbody>
</table>

GENERAL DESCRIPTION OF BUSINESS ENTITY/TRUST/GOVERNMENTAL AGENCY ACTIVITY:
Association of Bay Area Governments (ABAG), and Local Agency Formation Commission (LAFCO)

POSITION: Board member, Commissioner

GENERAL DESCRIPTION OF SERVICES RENDERED: stipend

4. LIST EACH REPORTABLE SINGLE SOURCE OF INCOME OR $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: [Signature]
Date Signed: [Date] (month, day, year)

(File the originally signed statement with the City Clerk.)
**Disclosure of Fundraising Report Form**

**NAME OF ELECTED OFFICIAL:** Sergio Jimenez  
**OFFICE HELD:** Councilmember

**DATE OF FILING:** 10/15/19

### Amounts

<table>
<thead>
<tr>
<th>Date of Solicitation</th>
<th>Amount Contributed</th>
<th>Full Name, Address, Employer and Occupation of Contributor</th>
<th>Description of Event or Purpose of Fundraising Contribution</th>
</tr>
</thead>
</table>
| 7/26/19              | $1,000             | The Schoennauer Company  
90 Hawthorne Way  
San Jose, CA 95110 | 9/7/19  
City sponsored  
Village Fest |
| 9/4/19               | $2,000             | Angie Cocke  
3150 Almaden Expwy #100  
San Jose, CA 95118 | 9/7/19  
City sponsored  
Village Fest |
| 7/25/19              | $1,000             | Premiere One Credit Union  
6840 Via del Oro  
San Jose, CA 95119 | 9/7/19  
City sponsored  
Village Fest |
| 8/15/19              | $100               | Oak Grove Neighborhood Association  
5387 Pecan Blossom Dr.  
San Jose, CA 95123 | 9/7/19  
City sponsored  
Village Fest |
| 8/6/19               | $500               | San Jose Fire Fighters, Local 230  
425 E. Santa Clara St. Ste.300  
San Jose, CA 95113 | 9/7/19  
City sponsored  
Village Fest |
| 8/14/19              | $500               | Santa Clara & San Benito Counties Trades Council  
2102 Almaden Rd. #101  
San Jose, CA 95125 | 9/7/19  
City sponsored  
Village Fest |

**NOTHING TO REPORT:** ☐

**Signature:** [Signature]

**Date:** 10/11/19

City of San José Form DFR-1 (Nov 2010)
# Disclosure of Fundraising Report Form

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>DATE OF SOLICITATION</th>
<th>AMOUNT CONTRIBUTED</th>
<th>FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR</th>
<th>DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/25/19</td>
<td>$100</td>
<td>Pedron's Storage P.O. Box 33223 San Jose, CA 95153</td>
<td>9/7/19 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/15/19</td>
<td>$100</td>
<td>Meriwest Credit Union P.O. Box 520953 San Jose, CA 95153</td>
<td>9/7/19 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/16/19</td>
<td>$100</td>
<td>Scarnecchia Real Estate Inc. 6273 Mountford Dr. San Jose, CA 95123</td>
<td>9/7/19 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/14/19</td>
<td>$1,000</td>
<td>Laborers' International Union - Local 270 2195 Fortune Dr. San Jose, CA 95131</td>
<td>9/7/19 City sponsored Village Fest</td>
</tr>
<tr>
<td>7/30/19</td>
<td>$100</td>
<td>Carole Holcomb 5755 Cohasset Wy. San Jose, CA 95123</td>
<td>9/7/19 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/30/19</td>
<td>$2,000</td>
<td>California Waste Solutions, Inc. 1120 Berryessa Rd. San Jose, CA 95133</td>
<td>9/7/19 City sponsored Village Fest</td>
</tr>
<tr>
<td>8/21/19</td>
<td>$100</td>
<td>Bernal Partners dba Supercuts 1475 Saratoga Ave. Ste. 250 San Jose, CA 95129</td>
<td>9/7/19 City sponsored Village Fest</td>
</tr>
</tbody>
</table>

NOTHING TO REPORT □ Signature: [Signature]

Date: 10/11/19

City of San José Form DFR-1 (Nov/2010)
Disclosure of Fundraising Report Form

<table>
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<tr>
<th>DATE OF SOLICITATION</th>
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<th>FULL NAME, ADDRESS, EMPLOYER AND OCCUPATION OF CONTRIBUTOR</th>
<th>DESCRIPTION OF EVENT OR PURPOSE OF FUNDRAISING CONTRIBUTION</th>
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<tr>
<td>8/27/19</td>
<td>$250</td>
<td>Astrid Tromp-Koerse&lt;br&gt;450 Curie Dr.&lt;br&gt;San Jose, CA 95123</td>
<td>9/7/19 City sponsored Village Fest</td>
</tr>
<tr>
<td>9/3/19</td>
<td>$2,500</td>
<td>L&amp;L Franchise&lt;br&gt;931 University Ave. Ste. 202&lt;br&gt;Honolulu, HI 96826</td>
<td>9/7/19 City Sponsored Village Fest</td>
</tr>
</tbody>
</table>

NOTHING TO REPORT □

Signature

Date 10/11/19

City of San José Form DFR-1 (Nov/2010)
## Invoice

**Invoice Date:** 10.11.19

**Bill To:** Council Member Jimenez

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>Safe from the Start! Sponsorship</td>
<td>$1,000.00</td>
</tr>
</tbody>
</table>

**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.