

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

Date Initial Filing Received  
Filing Official Use Only



**RECEIVED**

*L. Avery*

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

Sanchez Victor A

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

Agency Name (Do not use acronyms)

Bellflower City Council

Division, Board, Department, District, if applicable

Your Position

District 4

Candidate

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

State

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)

Multi-County \_\_\_\_\_

County of \_\_\_\_\_

City of Bellflower

Other \_\_\_\_\_

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

Annual: The period covered is January 1, 2019, through December 31, 2019.

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

-or- The period covered is \_\_\_\_\_/\_\_\_\_\_/, through December 31, 2019.

The period covered is January 1, 2019, through the date of leaving office.

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

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

Candidate: Date of Election 11/03/2020 and office sought, if different than Part 1: \_\_\_\_\_

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

**Schedules attached**

Schedule A-1 - Investments - schedule attached  
 Schedule A-2 - Investments - schedule attached  
 Schedule B - Real Property - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule D - Income - Gifts - schedule attached  
 Schedule E - Income - Gifts - Travel Payments - schedule attached

-OR-  **None** - No reportable interests on any schedule

**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 acknowledge this is a public document.

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

Date Signed 07/19/2020  
(month, day, year)

Signature

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

Name  
Victor A. Sanchez

**SCHEDULE D**  
**Income – Gifts**

► NAME OF SOURCE (Not an Acronym)

Vanessa Delgado

ADDRESS (Business Address Acceptable)

6055 E. Washington Blvd. Commerce, CA 90040

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Development

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 05 / 19	\$ 120	HOPE Benefit Ticket

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

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

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

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**MAR 30 2022**

**CITY CLERK'S OFFICE**

Please type or print in ink.

NAME OF FILER (LAST) **SANCHEZ** (FIRST) **VICTOR** (MIDDLE) **AFONSO**

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

Agency Name (Do not use acronyms)

**CITY OF BELLFLOWER**

Division, Board, Department, District, if applicable

Your Position

**COUNCIL MEMBER**

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency:

Position:

2021 APR 1 8:30 AM  
RECEIVED  
CITY CLERK'S OFFICE  
BELLFLOWER, CA  
FILING

**2. Jurisdiction of Office (Check at least one box)**

State

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)

Multi-County \_\_\_\_\_

County of \_\_\_\_\_

City of **BELLFLOWER**

Other \_\_\_\_\_

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

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

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

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

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

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

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

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

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

**Schedules attached**

Schedule A-1 - Investments - schedule attached  
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Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule D - Income - Gifts - schedule attached  
 Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS **STREET**  
(Business or Agency Address Recommended - Public Document)

CITY

STATE

ZIP CODE

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the for

Date Signed **3/30/22**

(month, day, year)

Signature \_\_\_\_\_

(File the originally signed paper statement with your filing officer.)

Print

Clear



**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Victor A. Sanchez

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Community Family Guidance Center

ADDRESS (Business Address Acceptable)

10929 South St. Suite 208B, Cerritos, CA 90703

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Children's Mental Health Non-Profit

YOUR BUSINESS POSITION

Director of Community Relations

GROSS INCOME RECEIVED

No Income - Business Position Only

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary     Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
*(Real property, car, boat, etc.)*

Loan repayment

Commission or     Rental Income, list each source of \$10,000 or more

\_\_\_\_\_  
*(Describe)*

Other \_\_\_\_\_  
*(Describe)*

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Towne Center Realtors, Inc

ADDRESS (Business Address Acceptable)

1901 E Lambert Rd # 209, La Habra, CA 90631

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Real Estate

YOUR BUSINESS POSITION

Realtor

GROSS INCOME RECEIVED

No Income - Business Position Only

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary     Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
*(Real property, car, boat, etc.)*

Loan repayment

Commission or     Rental Income, list each source of \$10,000 or more

\_\_\_\_\_  
*(Describe)*

Other \_\_\_\_\_  
*(Describe)*

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

- \* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

INTEREST RATE

TERM (Months/Years)

ADDRESS (Business Address Acceptable)

\_\_\_\_\_ %     None

BUSINESS ACTIVITY, IF ANY, OF LENDER

SECURITY FOR LOAN

None     Personal residence

HIGHEST BALANCE DURING REPORTING PERIOD

Real Property \_\_\_\_\_  
*Street address*

\$500 - \$1,000

\_\_\_\_\_  
*City*

\$1,001 - \$10,000

Guarantor \_\_\_\_\_

\$10,001 - \$100,000

Other \_\_\_\_\_  
*(Describe)*

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

**Print**

**Clear**

Name

Victor A. Sanchez

**SCHEDULE D**  
**Income – Gifts**► NAME OF SOURCE (*Not an Acronym*)

Hensley Law Group Hosted Dinner

ADDRESS (*Business Address Acceptable*)

2600 W. Olive Ave. Suite 500 Burbank, CA 91505

## BUSINESS ACTIVITY, IF ANY, OF SOURCE

Legal Service

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8 / 27 / 21	\$ 180	Dinner
8 / 28 / 21	\$ 94	Dinner
9 / 17 / 21	\$ 214	Dinner

► NAME OF SOURCE (*Not an Acronym*)ADDRESS (*Business Address Acceptable*)

## BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

► NAME OF SOURCE (*Not an Acronym*)ADDRESS (*Business Address Acceptable*)

## BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

► NAME OF SOURCE (*Not an Acronym*)

CR&amp;R

ADDRESS (*Business Address Acceptable*)

11292 Western Ave. , Stanton, CA 90680

## BUSINESS ACTIVITY, IF ANY, OF SOURCE

Waste Management

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9 / 16 / 21	\$ 120	Dinner
9 / 23 / 21	\$ 100	Dinner

► NAME OF SOURCE (*Not an Acronym*)ADDRESS (*Business Address Acceptable*)

## BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

► NAME OF SOURCE (*Not an Acronym*)ADDRESS (*Business Address Acceptable*)

## BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

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

**Print****Clear**

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

Date Initial Filing Received  
Filing Official Use Only

Filed Date: 04/03/2023 09:40 AM  
SAN: FPPC

Please type or print in ink.

NAME OF FILER (LAST)

(FIRST)

(MIDDLE)

Sanchez

Victor

Afonso

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

Agency Name (Do not use acronyms)

**City of Bellflower**

Division, Board, Department, District, if applicable

Your Position

**City Council Member**

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

State

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)

Multi-County \_\_\_\_\_

County of \_\_\_\_\_

City of **Bellflower**

Other \_\_\_\_\_

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

**Annual:** The period covered is January 1, 2022, through December 31, 2022.

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

-or- The period covered is \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_, through December 31, 2022.

The period covered is January 1, 2022, through the date of leaving office.

**Assuming Office:** Date assumed \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

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

**Candidate:** Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary (required)**

► **Total number of pages including this cover page:** 8

**Schedules attached**

**Schedule A-1 - Investments** – schedule attached  
 **Schedule A-2 - Investments** – schedule attached  
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**Schedule C - Income, Loans, & Business Positions** – schedule attached  
 **Schedule D - Income - Gifts** – schedule attached  
 **Schedule E - Income - Gifts - Travel Payments** – schedule attached

**-or-  None** - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS  
(Business or Agency Address Recommended - Public Document)

CITY

STATE

ZIP CODE

**16600 Civic Center Dr**

**Bellflower**

**CA**

**90706-5447**

DAYTIME TELEPHONE NUMBER

**( 562 ) 804-1424 ext:2222**

EMAIL ADDRESS

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

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

Date Signed 04/03/2023 09:40 AM  
(month, day, year)

Signature

**Victor Afonso Sanchez**

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

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Victor Sanchez

► NAME OF BUSINESS ENTITY

Apple, Inc

GENERAL DESCRIPTION OF THIS BUSINESS

Computers, Phones, Consumer Services

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

Nike

GENERAL DESCRIPTION OF THIS BUSINESS

Apparel

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

Starbucks

GENERAL DESCRIPTION OF THIS BUSINESS

Coffee Shop

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

Meta

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Services

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

Netflix

GENERAL DESCRIPTION OF THIS BUSINESS

Streaming Services

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

Micron Technology

GENERAL DESCRIPTION OF THIS BUSINESS

Hardware Chip Manufacture

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

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

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Victor Sanchez

► NAME OF BUSINESS ENTITY

**Paypal Holdings**

GENERAL DESCRIPTION OF THIS BUSINESS

**Financial**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ / 22      \_\_\_\_ / \_\_\_\_ / 22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ / 22      \_\_\_\_ / \_\_\_\_ / 22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Jet Blue**

GENERAL DESCRIPTION OF THIS BUSINESS

**Transportation**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership       Income Received of \$0 - \$499  
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IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ / 22      \_\_\_\_ / \_\_\_\_ / 22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Lyft**

GENERAL DESCRIPTION OF THIS BUSINESS

**Transportation**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ / 22      \_\_\_\_ / \_\_\_\_ / 22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ / 22      \_\_\_\_ / \_\_\_\_ / 22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Verizon**

GENERAL DESCRIPTION OF THIS BUSINESS

**Communication**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ / 22      \_\_\_\_ / \_\_\_\_ / 22  
 ACQUIRED      DISPOSED

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

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Victor Sanchez

► NAME OF BUSINESS ENTITY

Disney

GENERAL DESCRIPTION OF THIS BUSINESS

**Entertainment**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership       Income Received of \$0 - \$499  
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IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

Stock       Other \_\_\_\_\_  
(Describe)  
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 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership       Income Received of \$0 - \$499  
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IF APPLICABLE, LIST DATE:

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 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership       Income Received of \$0 - \$499  
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 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

Stock       Other \_\_\_\_\_  
(Describe)  
 Partnership       Income Received of \$0 - \$499  
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IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/22      \_\_\_\_/\_\_\_\_/22  
 ACQUIRED      DISPOSED

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

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
 (Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name

Victor Sanchez

**► 1. BUSINESS ENTITY OR TRUST**

**AACES Investments LLC**

Name

9548 Maple St. Bellflower, CA 90706

Address (Business Address Acceptable)

Check one

Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

**Real Estate Investment Group**

FAIR MARKET VALUE

- \$0 - \$1,999
- \$2,000 - \$10,000
- \$10,001 - \$100,000
- \$100,001 - \$1,000,000
- Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_ / 22    \_\_\_\_ / 22

ACQUIRED    DISPOSED

NATURE OF INVESTMENT

- Partnership
- Sole Proprietorship
- LLC
- Other \_\_\_\_\_

YOUR BUSINESS POSITION **Managing Partner**

**► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

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

**► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE** (Attach a separate sheet if necessary)

None    or     Names listed below

**► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

- INVESTMENT
- REAL PROPERTY

**N/A**

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property

**Real Estate**

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- \$2,000 - \$10,000
- \$10,001 - \$100,000
- \$100,001 - \$1,000,000
- Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_ / 22    \_\_\_\_ / 22

ACQUIRED    DISPOSED

NATURE OF INTEREST

- Property Ownership/Deed of Trust
- Stock
- Partnership

Leasehold \_\_\_\_\_     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

**► 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

FAIR MARKET VALUE

- \$0 - \$1,999
- \$2,000 - \$10,000
- \$10,001 - \$100,000
- \$100,001 - \$1,000,000
- Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_ / 22    \_\_\_\_ / 22

ACQUIRED    DISPOSED

NATURE OF INVESTMENT

- Partnership
- Sole Proprietorship
- Other \_\_\_\_\_

YOUR BUSINESS POSITION \_\_\_\_\_

**► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

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

**► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE** (Attach a separate sheet if necessary)

None    or     Names listed below

**► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

- INVESTMENT
- REAL PROPERTY

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- \$2,000 - \$10,000
- \$10,001 - \$100,000
- \$100,001 - \$1,000,000
- Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_ / 22    \_\_\_\_ / 22

ACQUIRED    DISPOSED

NATURE OF INTEREST

- Property Ownership/Deed of Trust
- Stock
- Partnership

Leasehold \_\_\_\_\_     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

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

Name

Victor Sanchez

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

6277-012-017

CITY

Bellflower

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

IF APPLICABLE, LIST DATE:  
**01/27/22** / / 22  
 ACQUIRED DISPOSED

NATURE OF INTEREST

Ownership/Deed of Trust  Easement

Leasehold \_\_\_\_\_  \_\_\_\_\_ Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

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

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

None

Jesus Duran

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

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

IF APPLICABLE, LIST DATE:  
 / / 22 / / 22  
 ACQUIRED DISPOSED

NATURE OF INTEREST

Ownership/Deed of Trust  Easement

Leasehold \_\_\_\_\_  \_\_\_\_\_ Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

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

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

None

\* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)

\_\_\_\_\_ %  None

HIGHEST BALANCE DURING REPORTING PERIOD

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

Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)

\_\_\_\_\_ %  None

HIGHEST BALANCE DURING REPORTING PERIOD

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

Guarantor, if applicable

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

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Victor Sanchez

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Community Family Guidance Center

ADDRESS (Business Address Acceptable)

10929 South St Suite 208B, Cerritos CA, 90703

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Children's Mental Health Non-Profit

YOUR BUSINESS POSITION

Director of Community Relations

GROSS INCOME RECEIVED  No Income - Business Position Only

\$500 - \$1,000  \$1,001 - \$10,000

\$10,001 - \$100,000  OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary  Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

Loan repayment

Commission or  Rental Income, list each source of \$10,000 or more

(Describe)

Other \_\_\_\_\_  
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Keller Williams - Whittier

ADDRESS (Business Address Acceptable)

16310 Whittier Blvd, Whittier, CA 90603

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Real Estate

YOUR BUSINESS POSITION

Realtor

GROSS INCOME RECEIVED  No Income - Business Position Only

\$500 - \$1,000  \$1,001 - \$10,000

\$10,001 - \$100,000  OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary  Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

Loan repayment

Commission or  Rental Income, list each source of \$10,000 or more

(Describe)

Other \_\_\_\_\_  
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

- \* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

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

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

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%  None

SECURITY FOR LOAN

None  Personal residence

Real Property \_\_\_\_\_  
Street address

City

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
(Describe)

Name

Victor Sanchez

**SCHEDULE D**  
**Income – Gifts**

► NAME OF SOURCE (*Not an Acronym*)

**CR&R**

ADDRESS (*Business Address Acceptable*)

**11292 Western Ave. , Stanton, CA 90680**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

**Waste Management**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<b>05 / 12 / 22</b>	<b>\$ 64</b>	<b>Dinner</b>

► NAME OF SOURCE (*Not an Acronym*)

**TGIS Catering Services, Inc.**

ADDRESS (*Business Address Acceptable*)

**2950 Airport Ln. Long Beach, CA 90806**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

**Catering services and event planning**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<b>12 / 15 / 22</b>	<b>\$ 150</b>	<b>Gift Card</b>

► NAME OF SOURCE (*Not an Acronym*)

ADDRESS (*Business Address Acceptable*)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

► NAME OF SOURCE (*Not an Acronym*)

**Hensley Law Group**

ADDRESS (*Business Address Acceptable*)

**2600W. Olive Ave. Suite 500 Burbank, CA 91505**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

**Legal Services**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<b>05 / 13 / 22</b>	<b>\$ 70.24</b>	<b>Dinner</b>

► NAME OF SOURCE (*Not an Acronym*)

ADDRESS (*Business Address Acceptable*)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

► NAME OF SOURCE (*Not an Acronym*)

ADDRESS (*Business Address Acceptable*)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

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

FEB - 9 2024

**CITY CLERK'S OFFICE**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
**SANCHEZ** **VICTOR** **AFONSO**

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

Agency Name (Do not use acronyms)

**CITY OF BELLFLOWER**

Division, Board, Department, District, if applicable

Your Position

**COUNCIL MEMBER**

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

State

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)

Multi-County \_\_\_\_\_

County of \_\_\_\_\_

City of **BELLFLOWER**

Other \_\_\_\_\_

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

**Annual:** The period covered is January 1, 2023, through December 31, 2023.

-or-

The period covered is \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_, through December 31, 2023.

**Assuming Office:** Date assumed \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

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

The period covered is January 1, 2023, through the date of leaving office.

-or-

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

**Candidate:** Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary (required)**

► **Total number of pages including this cover page:** 7

**Schedules attached**

**Schedule A-1 - Investments** – schedule attached

**Schedule C - Income, Loans, & Business Positions** – schedule attached

**Schedule A-2 - Investments** – schedule attached

**Schedule D - Income - Gifts** – schedule attached

**Schedule B - Real Property** – schedule attached

**Schedule E - Income - Gifts - Travel Payments** – schedule attached

-or-  **None** - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS STREET  
(Business or Agency Address Recommended - Public Document)

CITY

STATE

ZIP CODE

[REDACTED]

\_\_\_\_\_ contained

herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the

Date Signed

**2/9/24**

(month, day, year)

Signature

[REDACTED]

with your filing official.)

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

*Investments must be itemized.*

*Do not attach brokerage or financial statements.*

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

**Victor A. Sanchez**

► NAME OF BUSINESS ENTITY

**Apple, Inc**

GENERAL DESCRIPTION OF THIS BUSINESS

**Computers, Phone, Consumer Services**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/23      \_\_\_\_/\_\_\_\_/23  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Nike**

GENERAL DESCRIPTION OF THIS BUSINESS

**Apparel**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/23      \_\_\_\_/\_\_\_\_/23  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Starbucks**

GENERAL DESCRIPTION OF THIS BUSINESS

**Coffee Shop**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/23      \_\_\_\_/\_\_\_\_/23  
 ACQUIRED      DISPOSED

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

► NAME OF BUSINESS ENTITY

**Meta**

GENERAL DESCRIPTION OF THIS BUSINESS

**Consumer Services**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/23      \_\_\_\_/\_\_\_\_/23  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Netflix**

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/23      \_\_\_\_/\_\_\_\_/23  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Micron Technology**

GENERAL DESCRIPTION OF THIS BUSINESS

**Hardware Chip Manufacturer**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/23      \_\_\_\_/\_\_\_\_/23  
 ACQUIRED      DISPOSED

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

*Investments must be itemized.*

*Do not attach brokerage or financial statements.*

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

**Victor A. Sanchez**

► NAME OF BUSINESS ENTITY

**Paypay Holdings**

GENERAL DESCRIPTION OF THIS BUSINESS

**Financial**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ /23      \_\_\_\_ / \_\_\_\_ /23  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Jet Blue**

GENERAL DESCRIPTION OF THIS BUSINESS

**Transportation**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ /23      \_\_\_\_ / \_\_\_\_ /23  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Disney**

GENERAL DESCRIPTION OF THIS BUSINESS

**Entertainment**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ /23      \_\_\_\_ / \_\_\_\_ /23  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Lyft**

GENERAL DESCRIPTION OF THIS BUSINESS

**Consumer Services**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ /23      \_\_\_\_ / \_\_\_\_ /23  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Verizon**

GENERAL DESCRIPTION OF THIS BUSINESS

**Communication**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ /23      \_\_\_\_ / \_\_\_\_ /23  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

**Boeing**

GENERAL DESCRIPTION OF THIS BUSINESS

**Transportation**

FAIR MARKET VALUE

\$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT

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

IF APPLICABLE, LIST DATE:

\_\_\_\_ / \_\_\_\_ /23      \_\_\_\_ / \_\_\_\_ /23  
 ACQUIRED      DISPOSED

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





**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Victor A. Sanchez

**► 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Community Family Guidance Center

ADDRESS (Business Address Acceptable)

10929 South St Suite 208B, Cerritos, CA 90703

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Children's Mental Health Non-Profit

YOUR BUSINESS POSITION

Director of Community Relations

GROSS INCOME RECEIVED

No Income - Business Position Only  
 \$500 - \$1,000  
 \$10,001 - \$100,000  
 \$1,001 - \$10,000  
 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary  Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

Loan repayment

Commission or  Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
(Describe)

Other \_\_\_\_\_  
(Describe)

**► 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Keller Williams - Whittier

ADDRESS (Business Address Acceptable)

16310 Whittier Blvd, Whittier, CA 90603

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Real Estate

YOUR BUSINESS POSITION

Realtor

GROSS INCOME RECEIVED

No Income - Business Position Only  
 \$500 - \$1,000  
 \$10,001 - \$100,000  
 \$1,001 - \$10,000  
 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary  Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

Loan repayment

Commission or  Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
(Describe)

Other \_\_\_\_\_  
(Describe)

**► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_ %  None

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

SECURITY FOR LOAN

None  Personal residence

HIGHEST BALANCE DURING REPORTING PERIOD

Real Property \_\_\_\_\_

Street address

\$500 - \$1,000

\_\_\_\_\_

City

\$1,001 - \$10,000

Guarantor \_\_\_\_\_

\$10,001 - \$100,000

Other \_\_\_\_\_

(Describe)

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

**SCHEDULE D**  
**Income – Gifts**

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Victor A. Sanchez

► NAME OF SOURCE (*Not an Acronym*)

CR&R

ADDRESS (*Business Address Acceptable*)

11292 Western Ave., Stanton, CA 90680

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Waste Management

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5 18 23	88	Dinner
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____

► NAME OF SOURCE (*Not an Acronym*)

TGIS Catering Services, Inc

ADDRESS (*Business Address Acceptable*)

2950 Airport Ln. Long Beach, CA 90806

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Catering Services and Event Planning

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 17 23	150	Gift Card
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____

► NAME OF SOURCE (*Not an Acronym*)

ADDRESS (*Business Address Acceptable*)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____

► NAME OF SOURCE (*Not an Acronym*)

Burke William & Sorensen

ADDRESS (*Business Address Acceptable*)

444 South Flower St.-Ste 2400, Los Angeles, CA 9007

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Legal Services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5 19 23	130.60	Dinner
_____ / _____ / _____	\$_____	_____
9 20 23	86.40	Dinner
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____

► NAME OF SOURCE (*Not an Acronym*)

ADDRESS (*Business Address Acceptable*)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____

► NAME OF SOURCE (*Not an Acronym*)

ADDRESS (*Business Address Acceptable*)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____
_____ / _____ / _____	\$_____	_____

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