

2011 MAR 31 PM 2: 52

11 APR -7 PM 12: 26

Please type or print in ink.

NAME OF FILER (LAST) (FIRST)
Sarmiento Vincent
CITY OF SANTA ANA
CLERK OF COUNCIL
Flavio

1. Office, Agency, or Court

Agency Name

City Council

Division, Board, Department, District, if applicable

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: _____

Position: _____

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

State

Judge (Statewide Jurisdiction)

Multi-County _____

County of _____

City of Santa Ana

Other _____

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

Annual: The period covered is January 1, 2010, through December 31, 2010.

Leaving Office: Date Left _____
(Check one)

-or-

The period covered is _____, through December 31, 2010.

The period covered is January 1, 2010, through the date of leaving office.

Assuming Office: Date _____

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

Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 9

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



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

Date Signed 3/31/11
(month, day, year)

Signature

**SCHEDULE A-1
Investments**

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

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name <u>Vincent F. Sarmiento</u>
--

▶ NAME OF BUSINESS ENTITY
Wells Fargo Investments

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Mutual Funds/Money Market Account

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:
 _____ / _____ / 10 _____ / _____ / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____ / _____ / 10 _____ / _____ / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____ / _____ / 10 _____ / _____ / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____ / _____ / 10 _____ / _____ / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____ / _____ / 10 _____ / _____ / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____ / _____ / 10 _____ / _____ / 10
 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
Vincent F. Sarmiento

► 1. BUSINESS ENTITY OR TRUST

Law Office of Vincent F. Sarmiento
 Name
1617 E. Fourth Street, Santa Ana, CA. 92701
 Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	/ / 10	/ / 10
<input checked="" type="checkbox"/> \$10,001 - \$100,000	/ / 10	/ / 10
<input type="checkbox"/> \$100,001 - \$1,000,000	/ / 10	/ / 10
<input type="checkbox"/> Over \$1,000,000	/ / 10	/ / 10

NATURE OF INVESTMENT
 Sole Proprietorship Partnership Other

YOUR BUSINESS POSITION Principal Attorney

► 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 BUSINESS ACTIVITY

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	/ / 10	/ / 10
<input type="checkbox"/> \$10,001 - \$100,000	/ / 10	/ / 10
<input type="checkbox"/> \$100,001 - \$1,000,000	/ / 10	/ / 10
<input type="checkbox"/> Over \$1,000,000	/ / 10	/ / 10

NATURE OF INVESTMENT
 Sole Proprietorship Partnership 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 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

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

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

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

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

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

Check one box:
 INVESTMENT REAL PROPERTY

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

Check one box:
 INVESTMENT REAL PROPERTY

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

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

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

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

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	/ / 10	/ / 10
<input type="checkbox"/> \$10,001 - \$100,000	/ / 10	/ / 10
<input type="checkbox"/> \$100,001 - \$1,000,000	/ / 10	/ / 10
<input type="checkbox"/> Over \$1,000,000	/ / 10	/ / 10

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000	/ / 10	/ / 10
<input type="checkbox"/> \$10,001 - \$100,000	/ / 10	/ / 10
<input type="checkbox"/> \$100,001 - \$1,000,000	/ / 10	/ / 10
<input type="checkbox"/> Over \$1,000,000	/ / 10	/ / 10

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____
 Yrs. remaining

Leasehold _____ Other _____
 Yrs. remaining

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

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

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
Vincent F. Sarmiento

► STREET ADDRESS OR PRECISE LOCATION
2105 W. Hall Ave.
CITY
Santa Ana, CA 92704

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 10 DISPOSED / / 10

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold Other
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.
Rafael Gutierrez

► STREET ADDRESS OR PRECISE LOCATION
315 N. Linwood Ave.
CITY
Santa Ana, CA 92701

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 10 DISPOSED / / 10

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold Other
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.
Hilda Marmolejo

* You are not required to report loans from commercial lending institutions 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*
GMAC Mortgage
ADDRESS (Business Address Acceptable)
3451 Hammond Ave., Waterloo, IA. 50704
BUSINESS ACTIVITY, IF ANY, OF LENDER
Financial Institution

INTEREST RATE TERM (Months/Years)
7.0 % None 30 Years

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*
GMAC Mortgage
ADDRESS (Business Address Acceptable)
3541 Hammond Ave., Waterloo, IA 50704
BUSINESS ACTIVITY, IF ANY, OF LENDER
Financial Institution

INTEREST RATE TERM (Months/Years)
7.0 % None 30 Years

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments:

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <div style="text-align: center; border: 1px solid black; padding: 2px;">Vincent F. Sarmiento</div>

▶ NAME OF SOURCE
Natl. Assoc. of Latino Elected & Appointed Officials
ADDRESS (Business Address Acceptable)
1122 W. Washington Blvd., Los Angeles, CA. 90015
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 19 / 10</u>	<u>\$ 42.50</u>	<u>Reception in Honor of</u>
<u> / / </u>	<u>\$ </u>	<u>Assembly Speaker</u>
<u> / / </u>	<u>\$ </u>	<u>John Perez.</u>

▶ NAME OF SOURCE
Californians for Jobs & A Strong Economy
ADDRESS (Business Address Acceptable)
921 11th St., Ste. 904, Sacramento, CA. 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political Action Committee

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 23 / 10</u>	<u>\$ 550.00</u>	<u>4th Annual New</u>
<u> / / </u>	<u>\$ </u>	<u>Democrats Cup at Half</u>
<u> / / </u>	<u>\$ </u>	<u>Moon Bay.</u>

▶ NAME OF SOURCE
Orange County Hispanic Bar Association
ADDRESS (Business Address Acceptable)
2130 E. Fourth Street, Santa Ana, CA. 92705
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 21 / 10</u>	<u>\$ 100.00</u>	<u>Public Law Center</u>
<u> / / </u>	<u>\$ </u>	<u>2010 Volunteers for</u>
<u> / / </u>	<u>\$ </u>	<u>Justice Dinner.</u>

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Comments: _____

COVER PAGE

11 NOV - 9 PM 2:11
Public Document

2011 NOV - 1 PM 4: 55

CITY OF SANTA ANA
CLERK OF COUNCIL

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Sarmiento Vincent Flavio

1. Office, Agency, or Court

Agency Name
City Council
Division, Board, Department, District, if applicable
Your Position
Council Member

▶ If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

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

State Judge (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of Santa Ana Other _____

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

Annual: The period covered is January 1, 2010, through December 31, 2010.
-or-
The period covered is _____, through December 31, 2010.
 Assuming Office: Date _____
 Candidate: Election Year _____ Office sought, if different than Part 1: _____
 Leaving Office: Date Left _____
(Check one)
 The period covered is January 1, 2010, through the date of leaving office.
 The period covered is _____, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

▶ Total number of pages including this cover page: _____

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

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1617 E. Fourth Street Santa Ana CA 92701
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(714) 245-9999 vincent@vfslaw.com

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

Date Signed 10/31/11
(month, day, year)

(d)(5)
[Redacted Signature]

11 NOV -9 PM 2:41 **Interests in Real Property**
 (Including Rental Income)

► STREET ADDRESS OR PRECISE LOCATION
1617 E. Fourth Street
 CITY
Santa Ana, CA. 92701

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED 10 / 10 / 10 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.
Maria Najera

* You are not required to report loans from commercial lending institutions 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*
American Home Mortgage
 ADDRESS (Business Address Acceptable)
P.O. Box 63130, Irvine, TX 75063
 BUSINESS ACTIVITY, IF ANY, OF LENDER
Financial Institution

INTEREST RATE 6.8 % None TERM (Months/Years) 30 Years

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

► STREET ADDRESS OR PRECISE LOCATION
 CITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED 10 / 10 / 10 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.

Comments: _____

Verification

Print Name _____

Office, Agency or Court _____

Statement Type 2010/2011 Annual Assuming Leaving
 _____ Annual Candidate

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.

Date Signed _____ (month, day, year)

Signature _____