

2013 APR -1 PM 4:43

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name  
Santa Ana 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
Multi-County
City of Santa Ana
Judge or Court Commissioner (Statewide Jurisdiction)
County of
Other

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.
Leaving Office: Date Left
The period covered is January 1, 2012, through the date of leaving office.
The period covered is through the date of leaving office.
Assuming Office: Date assumed
Candidate: Election year and office sought, if different than Part 1:

4. Schedule Summary

- 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
None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I do
I certify under penalty of perjury under the laws of the State
Date Signed 03/28/2013

**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 \_\_\_\_\_

▶ 1. BUSINESS ENTITY OR TRUST

**Wells Fargo Investments**

Name \_\_\_\_\_

**Mutual Funds / Money Market Account**

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:

\$0 - \$1,999                                      \_\_\_\_\_ / \_\_\_\_ / 12                      \_\_\_\_\_ / \_\_\_\_ / 12

\$2,000 - \$10,000                                      \_\_\_\_\_ / \_\_\_\_ / 12                      \_\_\_\_\_ / \_\_\_\_ / 12

\$10,001 - \$100,000                                      ACQUIRED                      DISPOSED

\$100,001 - \$1,000,000

Over \$1,000,000

NATURE OF INVESTMENT

Partnership     Sole Proprietorship     Stock                       Other

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

▶ 1. BUSINESS ENTITY OR TRUST

**Law Offices 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:

\$0 - \$1,999                                      \_\_\_\_\_ / \_\_\_\_ / 12                      \_\_\_\_\_ / \_\_\_\_ / 12

\$2,000 - \$10,000                                      \_\_\_\_\_ / \_\_\_\_ / 12                      \_\_\_\_\_ / \_\_\_\_ / 12

\$10,001 - \$100,000                                      ACQUIRED                      DISPOSED

\$100,001 - \$1,000,000

Over \$1,000,000

NATURE OF INVESTMENT

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

YOUR BUSINESS POSITION Principal

▶ 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)

None

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

None

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

▶ 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                      IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000                                      \_\_\_\_\_ / \_\_\_\_ / 12                      \_\_\_\_\_ / \_\_\_\_ / 12

\$10,001 - \$100,000                                      \_\_\_\_\_ / \_\_\_\_ / 12                      \_\_\_\_\_ / \_\_\_\_ / 12

\$100,001 - \$1,000,000                                      ACQUIRED                      DISPOSED

Over \$1,000,000

NATURE OF INTEREST

Property Ownership/Deed of Trust                       Stock                       Partnership

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

Yrs. remaining \_\_\_\_\_

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

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

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 INVESTMENT                       REAL PROPERTY

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\$10,001 - \$100,000                                      \_\_\_\_\_ / \_\_\_\_ / 12                      \_\_\_\_\_ / \_\_\_\_ / 12

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Over \$1,000,000

NATURE OF INTEREST

Property Ownership/Deed of Trust                       Stock                       Partnership

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

Yrs. remaining \_\_\_\_\_

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

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









**SCHEDULE D**  
**Income - Gifts**

Name  
**Vincent F. Sarmiento**

▶ NAME OF SOURCE (Not an Acronym)  
**CH2M Hill**

ADDRESS (Business Address Acceptable)  
**6 Hutton Centre Dr., Santa Ana, CA. 92707**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Engineering**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 09 / 12	\$ 300.00	Ticket to Orange County Business Council
___ / ___ / ___	\$ _____	<del>_____</del>
___ / ___ / ___	\$ _____	Annual Dinner.

▶ NAME OF SOURCE (Not an Acronym)  
**Cal State Univ. of Fullerton**

ADDRESS (Business Address Acceptable)  
**P.O. Box 6810, Fullerton, CA. 92834**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 10 / 12	\$ 175.00	Ticket to Honda Center
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Hispanic Bar Association of Orange County**

ADDRESS (Business Address Acceptable)  
**P.O. Box 6130 Newport Beach, CA. 92658**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 03 / 12	\$ 180.00	Ticket to Installation Dinner
___ / ___ / ___	\$ _____	For Annual Recipients
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Assemblyman Jose Solorio**

ADDRESS (Business Address Acceptable)  
**2400 East Katella Ave.**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Anaheim, CA. 92806**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 22 / 12	\$ 250.00	Ticket to Dinner w/ Ass -
___ / ___ / ___	\$ _____	emblyman Solorio
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**The Eli Home**

ADDRESS (Business Address Acceptable)  
**1175 N. East Street, Anaheim, CA. 92805**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Non-Profit**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 14 / 12	\$ 250.00	Ticket to Benefit for the
___ / ___ / ___	\$ _____	Eli House.
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**Discovery Science Center**

ADDRESS (Business Address Acceptable)  
**2500 N. Main Street, Santa Ana, CA. 92705**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 29 / 12	\$ 125.00	Ticket to Annual Discovery
___ / ___ / ___	\$ _____	center Gala.
___ / ___ / ___	\$ _____	_____

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