

STATEMENT OF ECONOMIC INTERESTS

Date Received  
Official Use Only

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Please type or print in ink.

NAME OF FILER (LAST) AGUILAR (FIRST) PATRICIA (MIDDLE) A. 14 MAR 21 P2:00

1. Office, Agency, or Court

CITY OF CHULA VISTA  
CITY CLERK'S OFFICE

Agency Name (Do not use acronyms)

CITY OF CHULA VISTA

Division, Board, Department, District, if applicable

CITY COUNCIL

Your Position

DEPUTY MAYOR (COUNCIL MEMBER)

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

Agency: SANDAG

Position: BAYSHORE BIKEWAY WORKING GROUP member

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

- State  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County  County of \_\_\_\_\_
- City of CHULA VISTA  Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2013, through December 31, 2013.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- or-  The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2013.  The period covered is January 1, 2013, through the date of leaving office.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

- 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. [Redacted Signature Area]

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete. I understand that any false or misleading information provided on this statement is a crime.

Date Signed 3/13/2014  
(month, day, year)

SF 22

**SCHEDULE D  
Income – Gifts**

Name  
Aguilar, Patricia

▶ NAME OF SOURCE (Not an Acronym)  
Board of Port Commissioners

ADDRESS (Business Address Acceptable)  
3165 Pacific Highway, San Diego, CA 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Port of San Diego

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 18 / 13</u>	<u>\$ 35.00</u>	<u>Port Commissioners'</u>
<u>   /   /   </u>	<u>\$      </u>	<u>swearing-in luncheon</u>
<u>   /   /   </u>	<u>\$      </u>	<u>                          </u>

▶ NAME OF SOURCE (Not an Acronym)  
Marine Group Boatworks

ADDRESS (Business Address Acceptable)  
997 G St., Chula Vista, CA 91910

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Ship repair

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 07 / 13</u>	<u>\$ 40.00</u>	<u>Port Tenants' Assn.</u>
<u>   /   /   </u>	<u>\$      </u>	<u>annual dinner</u>
<u>   /   /   </u>	<u>\$      </u>	<u>                          </u>

▶ NAME OF SOURCE (Not an Acronym)  
Planned Parenthood

ADDRESS (Business Address Acceptable)  
1075 Camino del Rio South, San Diego, CA 92108

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Medical services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 19 / 13</u>	<u>\$ 170.00</u>	<u>2 tickets to annual</u>
<u>   /   /   </u>	<u>\$      </u>	<u>dinner</u>
<u>   /   /   </u>	<u>\$      </u>	<u>                          </u>

▶ NAME OF SOURCE (Not an Acronym)  
California Women Lead

ADDRESS (Business Address Acceptable)  
1201 K St., Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Nonprofit women leaders' organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 10 / 13</u>	<u>\$ 55.00</u>	<u>Annual networking</u>
<u>   /   /   </u>	<u>\$      </u>	<u>luncheon</u>
<u>   /   /   </u>	<u>\$      </u>	<u>                          </u>

▶ NAME OF SOURCE (Not an Acronym)  
Chula Vista Police Foundation

ADDRESS (Business Address Acceptable)  
314 Fourth Ave., Chula Vista, CA 91910

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Fundraising for police department

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 15 / 13</u>	<u>\$ 200.00</u>	<u>2 tickets to gala</u>
<u>   /   /   </u>	<u>\$      </u>	<u>fundraiser, "An</u>
<u>   /   /   </u>	<u>\$      </u>	<u>Evening with Heroes"</u>

▶ NAME OF SOURCE (Not an Acronym)  
Ann Moore

ADDRESS (Business Address Acceptable)  
3165 Pacific Highway, San Diego, CA 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
San Diego Port Commissioner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 11 / 13</u>	<u>\$ 30.00</u>	<u>framed photo</u>
<u>   /   /   </u>	<u>\$      </u>	<u>                          </u>
<u>   /   /   </u>	<u>\$      </u>	<u>                          </u>

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

**SCHEDULE D**  
**Income – Gifts**

Name

Aguilar, Patricia

▶ **NAME OF SOURCE (Not an Acronym)**  
 Chula Vista Fire Department

ADDRESS (Business Address Acceptable)  
 447 F St., Chula Vista, CA 91910

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Fire department

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 30 / 13	\$ 15.00	T-shirt for breast cancer fundraiser
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
 Mountainwest Properties

ADDRESS (Business Address Acceptable)  
 303 H St., Suite 422, Chula Vista, CA 91910

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Real estate management

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 16 / 13	\$ 45.00	Christmas gift: Godiva chocolates gift basket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
 American Legion, Chula Vista Post 434

ADDRESS (Business Address Acceptable)  
 47 Fifth Ave. Chula Vista, CA 91910

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Veterans' organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 05 / 13	\$ 30.00	"Heroism, Valor & Citizenship" awards dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
 John Wainio, The San Diego Group

ADDRESS (Business Address Acceptable)  
 P.O. Box 371494, San Diego, CA 92137

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Political consulting

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 17 / 13	\$ 18.00	Christmas gift: box of See's candy
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
 Chula Vista Police Officers' Association

ADDRESS (Business Address Acceptable)  
 P.O. Box 848, Chula Vista, CA 91912

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Law enforcement bargaining group

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 14 / 13	\$ 100.00	2 tickets to CVPOA Christmas party
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ **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: \_\_\_\_\_