

STATEMENT OF ECONOMIC INTERESTS

FILED  
Date Received  
Official Use Only  
APR 15 2015

COVER PAGE  
AMENDED

COUNTY OF SANTA CLARA  
Clerk of the Board of Supervisors

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

County of Santa Clara Board of Supervisors

Division, Board, Department, District, if applicable

Your Position

County Supervisor (District 2)

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

Agency: Santa Clara Valley Transportation Authority

Position: Board Member

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

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

County of Santa Clara

City of \_\_\_\_\_

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: \_\_\_\_\_

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

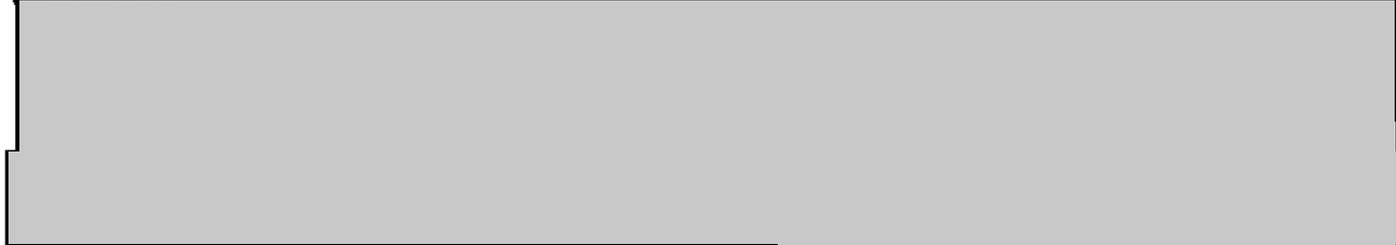
Schedule B - Real Property - schedule attached

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

-or-

None - No reportable interests on any schedule

5. Verification



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

Date Signed 04/15/2015  
(month, day, year)

Signature

**Additional form 700 filing positions for Cindy Chavez**

- 1. Santa Clara County Supervisor**
- 2. Valley Transportation Authority Board member**
- 3. Bay Area Air Quality Management District Board member**
- 4. Association of Bay Area Governments Board member**
- 5. San Francisco Bay Restoration Authority Governing Board member**
- 6. Santa Clara County Local Agency Formation Commission (LAFCO) Board member**
- 7. California Workforce Investment Board –Governor’s Appointed Board member**

**SCHEDULE A-1  
Investments**

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

*Do not attach brokerage or financial statements.*

Name  
Cindy Chavez

▶ **NAME OF BUSINESS ENTITY**  
Cisco Systems Inc. (ESPP)

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Technology firm

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

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

**IF APPLICABLE, LIST DATE:**  
01 / 06 / 14      01 / 06 / 14  
 ACQUIRED                  DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Cisco Systems Inc. (ESPP)

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Technology firm

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

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

**IF APPLICABLE, LIST DATE:**  
06 / 03 / 14      06 / 03 / 14  
 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:**  
 \_\_\_\_ / \_\_\_\_ / 14      \_\_\_\_ / \_\_\_\_ / 14  
 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:**  
 \_\_\_\_ / \_\_\_\_ / 14      \_\_\_\_ / \_\_\_\_ / 14  
 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:**  
 \_\_\_\_ / \_\_\_\_ / 14      \_\_\_\_ / \_\_\_\_ / 14  
 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:**  
 \_\_\_\_ / \_\_\_\_ / 14      \_\_\_\_ / \_\_\_\_ / 14  
 ACQUIRED                  DISPOSED

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

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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Cindy Chavez
---

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME Cisco Systems Inc.	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) San Jose, CA 95134	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE Technology firm	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)	<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)
<input type="checkbox"/> Loan repayment	<input type="checkbox"/> Loan repayment
<input type="checkbox"/> Commission or <input type="checkbox"/> Rental income, list each source of \$10,000 or more _____ (Describe)	<input type="checkbox"/> Commission or <input type="checkbox"/> Rental income, list each source of \$10,000 or more _____ (Describe)
<input type="checkbox"/> Other _____ (Describe)	<input type="checkbox"/> Other _____ (Describe)

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

\* You are not required to report loans from commercial lending institutions, 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 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	INTEREST RATE _____% <input type="checkbox"/> None TERM (Months/Years) _____
SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ Street address _____ City _____	<input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ (Describe)

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

**SCHEDULE D**  
**Income – Gifts**

Name  
**Cindy Chavez**

▶ NAME OF SOURCE *(Not an Acronym)*  
 Cathedral of Faith

ADDRESS *(Business Address Acceptable)*  
 2315 Canoas Garden Avenue, San Jose, CA 95125

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Church

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 20 / 14	\$ 100.00	books & videos
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*  
 49ers Foundation

ADDRESS *(Business Address Acceptable)*  
 4900 Marie DeBartolo Way, Santa Clara, CA 95954

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Foundation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 28 / 14	\$ 422.00	football tickets
___ / ___ / ___	\$ _____	to be honored at game
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*  
 Greater Kansas City Chamber of Commerce

ADDRESS *(Business Address Acceptable)*  
 30 West Pershing Rd., Kansas City, MO 64108

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Business organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 28 / 14	\$ 65.24	Steaks
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*  
 Stanford University

ADDRESS *(Business Address Acceptable)*  
 450 Serra Mall, Stanford, CA 94305

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 University

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 10 / 14	\$ 240.00	football tickets
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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

FILED Filing  
Received  
Official Use Only  
APR 01 2015

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) COUNTY OF SANTA CLARA  
Chavez Cindy Clerk of the Board of Supervisors

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
County of Santa Clara Board of Supervisors

Division, Board, Department, District, if applicable Your Position  
County Supervisor (District 2)

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

Agency: Valley Transportation Authority Position: Board member

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
15 APR 10 PM 2:11

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

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

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

- Annual: The period covered is January 1, 2014, through December 31, 2014.
- OR-
- The period covered is \_\_\_\_\_ through December 31, 2014.
- Assuming Office: Date assumed \_\_\_\_\_
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
- The period covered is January 1, 2014, through the date of leaving office.
- 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: 5

- 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

(c)(1)  
herein and in any attached schedules is true and complete. I acknowledge (c)(1)  
I certify under penalty of perjury under the laws of the State of California  
Date Signed 3-31-2015  
(month, day, year)

**Additional form 700 filing positions for Cindy Chavez**

- 1. Santa Clara County Supervisor**
- 2. Valley Transportation Authority Board member**
- 3. Bay Area Air Quality Management District Board member**
- 4. Association of Bay Area Governments Board member**
- 5. San Francisco Bay Restoration Authority Governing Board member**
- 6. Santa Clara County Local Agency Formation Commission (LAFCO)  
Board member**
- 7. California Workforce Investment Board –Governor’s Appointed Board  
member**

**SCHEDULE A-1  
Investments**

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

*Do not attach brokerage or financial statements.*

Name  
Cindy Chavez

▶ NAME OF BUSINESS ENTITY  
Cisco Systems Inc. (ESPP)

GENERAL DESCRIPTION OF THIS BUSINESS  
Technology firm

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

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

IF APPLICABLE, LIST DATE:  
01 / 06 / 14      01 / 06 / 14  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Cisco Systems Inc. (ESPP)

GENERAL DESCRIPTION OF THIS BUSINESS  
Technology firm

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

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

IF APPLICABLE, LIST DATE:  
06 / 03 / 14      06 / 03 / 14  
 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:  
 \_\_\_\_ / \_\_\_\_ / 14      \_\_\_\_ / \_\_\_\_ / 14  
 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:  
 \_\_\_\_ / \_\_\_\_ / 14      \_\_\_\_ / \_\_\_\_ / 14  
 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:  
 \_\_\_\_ / \_\_\_\_ / 14      \_\_\_\_ / \_\_\_\_ / 14  
 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:  
 \_\_\_\_ / \_\_\_\_ / 14      \_\_\_\_ / \_\_\_\_ / 14  
 ACQUIRED                      DISPOSED

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

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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Cindy Chavez
---

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME Cisco Systems Inc.	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) San Jose, CA 95134	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE Technology firm	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input type="checkbox"/> Other _____ (Describe)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input type="checkbox"/> Other _____ (Describe)

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

\* You are not required to report loans from commercial lending institutions, 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)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER	<input type="checkbox"/> Real Property _____	Street address
_____		_____
HIGHEST BALANCE DURING REPORTING PERIOD		City
<input type="checkbox"/> \$500 - \$1,000		
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Other _____	(Describe)

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

**SCHEDULE D**  
**Income – Gifts**

Name  
 Cindy Chavez

▶ **NAME OF SOURCE (Not an Acronym)**  
 Cathedral of Faith

ADDRESS (Business Address Acceptable)  
 2315 Canoas Garden Avenue, San Jose, CA 95125

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 church

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9 / 20 / 14	\$ 100.	books & videos
	\$	
	\$	

▶ **NAME OF SOURCE (Not an Acronym)**  
 San Francisco 49ers

ADDRESS (Business Address Acceptable)  
 4900 Marie DeBartolo Way, Santa Clara, CA 95054

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 professional football team

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9 / 28 / 14	\$ 280.00	football tickets
	\$	(to be honored at game)
	\$	

▶ **NAME OF SOURCE (Not an Acronym)**  
 Greater Kansas City Chamber of Commerce

ADDRESS (Business Address Acceptable)  
 30 West Pershing Rd. Kansas City, MO 64108

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Business organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 28 / 14	\$ 65.24	Steaks
	\$	
	\$	

▶ **NAME OF SOURCE (Not an Acronym)**  
 Stanford University

ADDRESS (Business Address Acceptable)  
 450 Serra Mall, Stanford CA 94305

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 University

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 10 / 14	\$ 264.00	football tickets
	\$	
	\$	

▶ **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: \_\_\_\_\_