

AMENDMENT

COVER PAGE

Filed Date: 09/03/2019 03:09 PM  
SAN: 031300023-STH-0023

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
City Officials - City Council  
Division, Board, Department, District, if applicable  
Your Position  
Councilmember - 2nd District

► 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 or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of \_\_\_\_\_
- City of Long Beach  Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2017, through December 31, 2017.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
(Check one)
- or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_\_, through December 31, 2017.  The period covered is January 1, 2017, through the date of leaving office.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_\_. -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 (must complete) ► Total number of pages including this cover page: 5

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 CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
333 West Ocean Blvd., 14th floor, 333 West Ocean Blvd., 14th floor Long Beach CA 90802  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
( 562 )570-6965 jeannine.pearce@longbeach.gov

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 09/03/2019 03:09 PM Signature Electronic Submission  
(month, day, year) (File the originally signed statement with your filing official.)







