CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Initial Filing Received
Official Use Only

Filed Date: 09/03/2019 03:12 PM
SAN: 031300023-STH-0023

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

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
- ☐ Multi-County _____
- ☒ City of Long Beach
- ☐ 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, 2018, through December 31, 2018.

-or-

The period covered is ____/____/____, through December 31, 2018.

☐ **Assuming Office:** Date assumed ____/____/____

☐ **Leaving Office:** Date Left ____/____/____
(Check one circle.)

○ The period covered is January 1, 2018, through the date of leaving office.

-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:* 4

Schedules attached

- ☐ **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 (Business or Agency Address Recommended - Public Document)	STREET	CITY	STATE	ZIP CODE
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 03:12 PM
(month, day, year)

Signature Electronic Submission
(File the originally signed paper statement with your filing official.)

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Andolon & Associates

ADDRESS *(Business Address Acceptable)*
P.O. Box 421226 Los Angeles, CA 90042

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political Consulting

YOUR BUSINESS POSITION
Independent Contractor

GROSS INCOME RECEIVED
- ☐ No Income - Business Position Only
- ☐ $500 - $1,000
- ☒ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- ☐ Salary
- ☐ Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*

_____ *(Describe)*

- ☒ Other Independent Contractor *(Describe)*

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
DHS Verde LLC

ADDRESS *(Business Address Acceptable)*
10250 Constellation Blvd., Ste. 2300 Los Angeles, CA 90067

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Retail Cannabis

YOUR BUSINESS POSITION
Independent Contractor

GROSS INCOME RECEIVED
- ☐ No Income - Business Position Only
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☒ $10,001 - $100,000
- ☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- ☐ Salary
- ☐ Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*

_____ *(Describe)*

- ☒ Other Independent Contractor *(Describe)*

Comments: _____

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, 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
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

INTEREST RATE _____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN
- ☐ None ☐ Personal residence
- ☐ Real Property _____ *Street address*
- _____ *City*
- ☐ Guarantor _____
- ☐ Other _____ *(Describe)*

Filer's Verification

Print Name Jeannine Pearce **Office, Agency or Court** City Officials - City Council

Statement Type ☒ 2018/2019 Annual ☐ _____ *(yr)* Annual ☐ Assuming ☐ Leaving ☐ Candidate

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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 03:12 PM *(month, day, year)* **Filer's Signature** Electronic Submission

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
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▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Ntuk for LBCCD Trustee 2018

ADDRESS *(Business Address Acceptable)*
249 E. Ocean Blvd., Ste 685 Long Beach, CA 90802

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Campaign Committee

YOUR BUSINESS POSITION
Independent Contractor

GROSS INCOME RECEIVED
- ☐ No Income - Business Position Only
- ☐ $500 - $1,000
- ☒ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- ☐ Salary
- ☐ Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*

_____ *(Describe)*

- ☒ Other Independent Contractor *(Describe)*

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Villanueva for Los Angeles Sheriff 2018

ADDRESS *(Business Address Acceptable)*
2183 El Catonita Dr. La Habra Heights, CA 90631

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Campaign Committee

YOUR BUSINESS POSITION
Independent Contractor

GROSS INCOME RECEIVED
- ☐ No Income - Business Position Only
- ☐ $500 - $1,000
- ☒ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- ☐ Salary
- ☐ Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
- ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- ☐ Sale of _____ *(Real property, car, boat, etc.)*
- ☐ Loan repayment
- ☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*

_____ *(Describe)*

- ☒ Other Independent Contractor *(Describe)*

Comments: _____

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, 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
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

INTEREST RATE
_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN
- ☐ None ☐ Personal residence
- ☐ Real Property _____ *Street address*
- _____ *City*
- ☐ Guarantor _____
- ☐ Other _____ *(Describe)*

Filer's Verification

Print Name Jeannine Pearce **Office, Agency or Court** City Officials - City Council

Statement Type ☒ 2018/2019 Annual ☐ _____ *(yr)* Annual ☐ Assuming ☐ Leaving ☐ Candidate

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SCHEDULE D
Income – Gifts

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► NAME OF SOURCE *(Not an Acronym)*
Long Beach Public Library Foundation
ADDRESS *(Business Address Acceptable)*
65 Pacific Ave, Ste 875, Long Beach, Ca 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-Profit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06/10/18	$250	Dinner Event
/ /	$	
/ /	$	

► 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)*
Mental Health America of Los Angeles
ADDRESS *(Business Address Acceptable)*
200 Pine Ave, Ste 400, Long Beach, Ca 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-Profit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10/08/18	$250	Individual Seat
/ /	$	
/ /	$	

► 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)*
Urban Commons
ADDRESS *(Business Address Acceptable)*
777 Figueroa #2850, Los Angeles, Ca 90017
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate Investment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/01/18	$109	Queen Mary Event
/ /	$	
/ /	$	

Filer's Verification

Print Name Jeannine Pearce

Office, Agency or Court City Officials - City Council

Statement Type ☒ 2018/2019 Annual ☐ Assuming ☐ Leaving ☐ _____ Annual (yr) ☐ Candidate

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Comments: