

COVER PAGE

A PUBLIC DOCUMENT

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Please type or print in ink.

NAME OF FILER (LAST) Garcia (FIRST) Robert (MIDDLE)

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City Officials - City Council

Division, Board, Department, District, if applicable

Your Position

Mayor

► 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, Retired Judge, Pro Tem 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, 2019, through December 31, 2019.
- Leaving Office:** Date Left ____/____/_____
(Check one circle.)
- Assuming Office:** Date assumed ____/____/_____
-or- The period covered is ____/____/_____, through December 31, 2019.
- Candidate:** Date of Election _____ and office sought, if different than Part 1: _____
- The period covered is January 1, 2019, through the date of leaving office.
- The period covered is ____/____/_____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 4

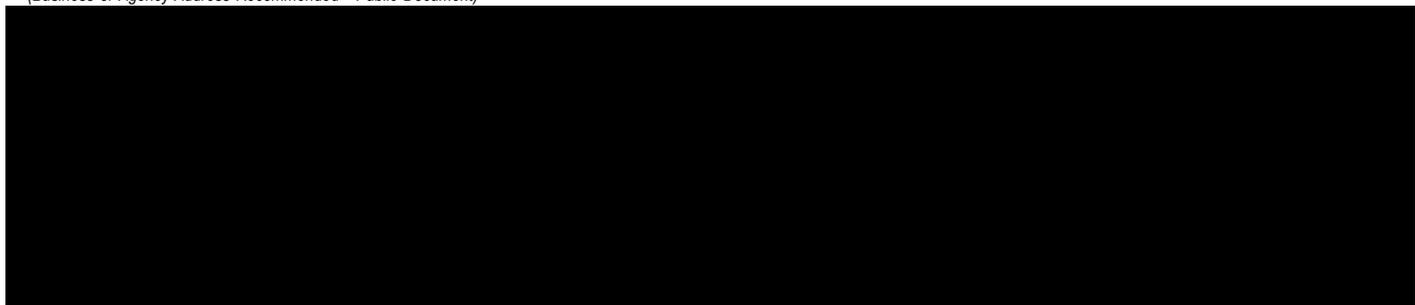
Schedules attached

- 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)



SCHEDULE D
Income – Gifts

Name
Robert Garcia

▶ NAME OF SOURCE *(Not an Acronym)*
Musical Theater West
 ADDRESS *(Business Address Acceptable)*
4350 E. 7th St. Long Beach, CA 90804
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Musical theater

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 05 / 19</u>	\$ <u>92</u>	<u>Theater ticket</u>
<u>07 / 13 / 19</u>	\$ <u>92</u>	<u>Theater ticket</u>
<u>10 / 01 / 19</u>	\$ <u>92</u>	<u>Theater ticket</u>

▶ NAME OF SOURCE *(Not an Acronym)*
P3 Theatre
 ADDRESS *(Business Address Acceptable)*
2041 Orchard Drive Unit D, Placentia, CA 92870
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Theater company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 13 / 19</u>	\$ <u>35</u>	<u>Theater ticket</u>
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Frank Suryan
 ADDRESS *(Business Address Acceptable)*
4901 Birch St, Newport Beach, CA 92660
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 05 / 19</u>	\$ <u>200</u>	<u>Wedding gift flowers</u>
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Wayne Chaney
 ADDRESS *(Business Address Acceptable)*
1135 Tehachapi Drive, Long Beach, CA 90807
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 10 / 19</u>	\$ <u>80</u>	<u>Wedding gift wallet</u>
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Luis Navarro
 ADDRESS *(Business Address Acceptable)*
1511 Termino Ave. Long Beach, CA 90804
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 05 / 19</u>	\$ <u>170</u>	<u>Holiday gift wine</u>
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
ASM Global
 ADDRESS *(Business Address Acceptable)*
800 W. Olympic Blvd, 3rd Fl, Los Angeles, 90015
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Event company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 10 / 19</u>	\$ <u>60</u>	<u>Holiday gift wine</u>
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

Comments: _____

SCHEDULE D
Income – Gifts

Name
Robert Garcia

▶ NAME OF SOURCE *(Not an Acronym)*
Long Beach Association Engineering Employees
 ADDRESS *(Business Address Acceptable)*
1 World Trade Center PO Box 32165 Long Beach CA 90832
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Labor union

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 11 / 19</u>	\$ <u>10</u>	<u>Holiday gift wine</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE *(Not an Acronym)*
Steve Goodling
 ADDRESS *(Business Address Acceptable)*
301 E Ocean Blvd, Long Beach, CA 90802
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 12 / 19</u>	\$ <u>48</u>	<u>Holiday gift wine</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE *(Not an Acronym)*
Aquarium of the Pacific
 ADDRESS *(Business Address Acceptable)*
100 Aquarium Way, Long Beach, CA 90802
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Aquarium

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 24 / 19</u>	\$ <u>175</u>	<u>Tickets</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE *(Not an Acronym)*
Hotel Maya
 ADDRESS *(Business Address Acceptable)*
700 Queensway Dr, Long Beach, CA 90802
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Hotel

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 05 / 19</u>	\$ <u>150</u>	<u>Hotel room</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE *(Not an Acronym)*
Queen Mary
 ADDRESS *(Business Address Acceptable)*
1126 Queens Highway, Long Beach, CA 90802
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Tourist attraction

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 27 / 19</u>	\$ <u>100</u>	<u>Hotel room</u>
<u>03 / 16 / 19</u>	\$ <u>100</u>	<u>Hotel Room</u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE *(Not an Acronym)*
Goldenvoice, LLC
 ADDRESS *(Business Address Acceptable)*
7175 Sunset Blvd. LA, CA 90046
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Concert production

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07 / 27 / 19</u>	\$ <u>300</u>	<u>Admission ticket</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

Comments: _____