



ATTACHMENT 8

Disclosure Statement

Pursuant to City Council Policy 101-01, prior to any action on a matter that requires discretionary action by the City Council, Planning Commission or other official legislative body of the City, a statement of disclosure of certain ownerships, financial interest, payments, and campaign contributions must be filed. The following information must be disclosed:

- List the names of all persons having a financial interest in the project that is the subject of the application, project or contract (e.g., owner, applicant, contractor, subcontractor, material supplier)
Sharp Health Care (non-profit)

Sharp Chula Vista Medical Center

- If any person* identified in section 1 above is a corporation or partnership, list the names of all individuals with an investment of \$2000 or more in the business (corporation/partnership) entity.

- If any person* identified in section 1 above is a non-profit organization or trust, list the names of any person who is the director of the non-profit organization or the names of the trustee, beneficiary and trustor of the trust.

Sharp Healthcare Board: see attached list

- Please identify every person, including any agents, employees, consultants, or independent contractors, whom you have authorized to represent you before the City in this matter

Pat Nemeth, VP Facilities, Sharp Healthcare

Chris Veum, AVR P Studios

Matthew Teichner, Sharp Healthcare

Melanie Barnhart, Barnhart-Reese Construction

Greg Konar, Atkins

West Reese, Barnhart-Reese Construction

- Has any person *identified in 1., 2., 3., or 4., above, or otherwise associated with this contract, project or application, had any financial dealings with an official** of the City of Chula Vista as it relates to this contract, project or application within the past 12 months? Yes _____ No

If yes, briefly describe the nature of the financial interest the official** may have in this contract.



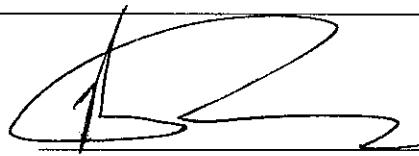
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6. Has any person *identified in 1, 2, 3, or 4, above, or otherwise associated with this contract, project or application, made a campaign contribution of more than \$250 within the past (12) months to a current member of the City of Chula Vista Council? Yes _____ No
if yes which council member? _____

7. Has any person *identified in 1, 2, 3, or 4, above, or otherwise associated with this contract, project or application, provided more than \$420 (or an item of equivalent value) to an official** of the City of Chula Vista in the past (12) months? (This includes any payment that confers a personal benefit on the recipient, a rebate or discount in the price of anything of value, money to retire a legal debt, gift, loan, etc) Yes _____ No
If yes, which official** and what was the nature of the item provided? _____

8. Has any person *identified in 1, 2, 3, or 4, above, or otherwise associated with this contract, project or application, been a source of income of \$500 or more to an official** of the City of Chula Vista in the past (12) months? Yes _____ No
If yes, which official** and the nature of the item provided? _____

Date 11/25/13



Signature of Contractor/Applicant

Matthew Teichner Sharp HealthCare
Print or type name of Contractor/Applicant

* Person is identified as: any individual, firm, co-partnership, joint venture, association, social club, fraternal organization, corporation, estate, trust, receiver, syndicate, any other county, city, municipality, district, or other political subdivision, or any other group or combination acting as a unit.
** official includes, but is not limited to: Mayor, Council member, Planning Commissioner, Member of a board, commission or committee of the City, and City employee or staff members
*** This disclosure Statement must be completed at the time the project application, or contract, is submitted to City staff for processing, and updated within one week prior to consideration by legislative body.

Last Updated: March 16, 2010