

Development Services Department Planning Division | Development Processing

APPLICATION APPENDIX B

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:

Sharp Chula Vista Medical Center	
f any person* identified in section 1. ndividuals with an investment of \$20	above is a corporation or partnership, list the names of all 100 or more in the business (corporation/partnership) entity
If any person* identified in section 1 any person who is the director of the and trustor of the Sharp Healthcare Board: see attach	above is a non-profit organization or trust, list the names of non-profit organization or the names of the trustee, benefic
contractors, whom you have authorize Pat Nemeth, VP Facilities, Sharp He	
contractors, whom you have authorize	ealthcare Chris Veum, AVRP Studios
contractors, whom you have authorize Pat Nemeth, VP Facilities, Sharp He	ealthcare Chris Veum, AVRP Studios
Pat Nemeth, VP Facilities, Sharp He Matthew Teichner, Sharp Healthcar Terry Strom, Strom Entitlement-Per	ced to represent you before the City III this matter. cealthcare Chris Veum, AVRP Studios e mitting PM ., or 4., above, or otherwise associated with this contract, prolings with an official** of the City of Chula Vista as it relates
Pat Nemeth, VP Facilities, Sharp He Matthew Teichner, Sharp Healthcar Terry Strom, Strom Entitlement-Per Has any person *identified in 1, 2, 3	ealthcare Chris Veum, AVRP Studios emitting PM or 4., above, or otherwise associated with this contract, pullings with an official** of the City of Chula Vista as it relates

Form App. 8 Rev 03.10 Pg 1/2



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APPLICATION APPENDIX B

Disclosure Statement - Page 2		
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 11/16/15 Signature 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.

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

- ** 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

Sharp HealthCare Board Members Sharp HealthCare Board of Directors



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