

**COVER PAGE**

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**A PUBLIC DOCUMENT**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Hume Patrick Andrew

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)  
City of Elk Grove  
Division, Board, Department, District, if applicable  
City Council  
Your Position  
Council Member, District 2

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: see attachment Position:

**2. Jurisdiction of Office (Check at least one box)**

State  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)  
 Multi-County Sacramento, El Dorado, San Joaquin  County of \_\_\_\_\_  
 City of Elk Grove  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 \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
-or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_\_, through (Check one circle.)  
 Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_\_.  The period covered is January 1, 2019, 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: 60**

**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)  
8401 Laguna Palms Way Elk Grove CA  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 916 ) 687-1693 phume@elkgrovecity.org

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 3/31/2020 Signature   
(month, day, year) (File the originally signed paper statement with your filing official.)

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name Hume, Patrick

▶ NAME OF BUSINESS ENTITY  
JGH LLC

GENERAL DESCRIPTION OF THIS BUSINESS  
Family estate holdings

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other Minority partner  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/19      \_\_\_\_/\_\_\_\_/19  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/19      \_\_\_\_/\_\_\_\_/19  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/19      \_\_\_\_/\_\_\_\_/19  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/19      \_\_\_\_/\_\_\_\_/19  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/19      \_\_\_\_/\_\_\_\_/19  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_  
(Describe)

Partnership       Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/19      \_\_\_\_/\_\_\_\_/19  
ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
Hume, Patrick

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
8934 El Oro Plaza Dr.

CITY  
Elk Groe, CA 95624

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED     /    /19      DISPOSED     /    /19

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_       \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None  
 Kathy Blankenship

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED     /    /19      DISPOSED     /    /19

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_       \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

\* You are not required to report loans from a commercial lending institution 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 \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ TERM (Months/Years) \_\_\_\_\_  
 \_\_\_\_\_%       None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ TERM (Months/Years) \_\_\_\_\_  
 \_\_\_\_\_%       None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b>
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name
Hume, Patrick

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
<b>NAME OF SOURCE OF INCOME</b> <u>Emerald Park Company</u>	<b>NAME OF SOURCE OF INCOME</b> <u>Sutter Health</u>
<b>ADDRESS (Business Address Acceptable)</b> <u>PO Box 550 Elk Grove, CA 95758</u>	<b>ADDRESS (Business Address Acceptable)</b> <u>2700 Gateway Oaks Sacramento, CA 95833</u>
<b>BUSINESS ACTIVITY, IF ANY, OF SOURCE</b> <u>Construction/commercial leasing</u>	<b>BUSINESS ACTIVITY, IF ANY, OF SOURCE</b> <u>Healthcare philanthropy</u>
<b>YOUR BUSINESS POSITION</b> <u>Controller</u>	<b>YOUR BUSINESS POSITION</b> <u>Director</u>
<b>GROSS INCOME RECEIVED</b> <input type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	<b>GROSS INCOME RECEIVED</b> <input type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000
<b>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</b> <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <small>(For self-employed use Schedule A-2.)</small>  <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)  <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small>  <input type="checkbox"/> Loan repayment  <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <small>(Describe)</small>  <input type="checkbox"/> Other _____ <small>(Describe)</small>	<b>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</b> <input type="checkbox"/> Salary <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income <small>(For self-employed use Schedule A-2.)</small>  <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)  <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small>  <input type="checkbox"/> Loan repayment  <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <small>(Describe)</small>  <input type="checkbox"/> Other _____ <small>(Describe)</small>

▶ 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:

<b>NAME OF LENDER*</b> _____ <b>ADDRESS (Business Address Acceptable)</b> _____ <b>BUSINESS ACTIVITY, IF ANY, OF LENDER</b> _____ <b>HIGHEST BALANCE DURING REPORTING PERIOD</b> <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	<b>INTEREST RATE</b> <b>TERM (Months/Years)</b> _____% <input type="checkbox"/> None    _____  <b>SECURITY FOR LOAN</b> <input type="checkbox"/> None <input type="checkbox"/> Personal residence  <input type="checkbox"/> Real Property _____ <small style="margin-left: 600px;">Street address</small> _____ <small style="margin-left: 600px;">City</small>  <input type="checkbox"/> Guarantor _____  <input type="checkbox"/> Other _____ <small style="margin-left: 600px;">(Describe)</small>
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**Comments:** \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

Name  
 Hume, Patrick

▶ NAME OF SOURCE *(Not an Acronym)*  
 Asian Resources Inc.

ADDRESS *(Business Address Acceptable)*  
 5100 El Paraiso Ave.

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Workforce development

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 31 / 19	\$ 75	Dinner
1 / 31 / 19	\$ 75	Dinner - spouse
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*  
 Region Business

ADDRESS *(Business Address Acceptable)*  
 1717 I St. Sacramento, CA 95811

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9 / 13 / 19	\$ 100	Annual BBQ
/ /	\$	
/ /	\$	

▶ 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)*

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)*

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)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: \_\_\_\_\_

**Multiple Positions reported on the Annual Statement Form 700 Statement of Economic Interests for filer Patrick Andrew Hume with the City of Elk Grove:**

- **Council Member (City of Elk Grove)**
- **Member of the Board (Finance Authority of the City of Elk Grove)**
- **Member of the Board (Parking Authority of the City of Elk Grove)**

**Multiple Positions reported on the Annual Statement Form 700 Statement of Economic Interests for filer Patrick Andrew Hume with additional agencies:**

- **Board Member (Capital SouthEast Connector Joint Powers Authority)**
- **Board Member (Sacramento Area Sewer District)**
- **Board Member (Sacramento County Sanitation Districts Financing Authority)**
- **Board Member (Sacramento Local Agency Formation Commission)**
- **Board Member (Sacramento Regional County Sanitation District)**
- **Board Member (Sacramento Regional Transit District)**
- **Board Member (Sacramento Transportation Authority and Sacramento Abandoned Vehicle Service Authority)**
- **Board Member (Paratransit, Inc., *through service on the Sacramento Regional Transit District*)**
- **Board Member (San Joaquin Joint Powers Authority, *through service on the Sacramento Regional Transit District*)**

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