

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT**

Date Initial Filing Received
Filing Official Use Only

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Schneider	Ann	no middle initial (nmi)

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Millbrae

Division, Board, Department, District, if applicable

Your Position

AUG 6 2020

City Council

Candidate for Millbrae City Council

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

City of Millbrae
Administration Dept.

Agency: _____

Position: _____

RECEIVED

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

State

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

Multi-County _____

County of _____

City of Millbrae

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.)

-or- The period covered is ____/____/_____, through December 31, 2019.

The period covered is January 1, 2019, through the date of leaving office.

Assuming Office: Date assumed ____/____/____

The period covered is ____/____/_____, through the date of leaving office.

Candidate: Date of Election 11/3/2020 and office sought, if different than Part 1: _____

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

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
[REDACTED]				

DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS
[REDACTED]	

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 August 5, 2020
(month, day, year)

Signature

[REDACTED]
(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.

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name

ANN Schneider

► NAME OF BUSINESS ENTITY

Hewlett Packard Enterprises

GENERAL DESCRIPTION OF THIS BUSINESS

Commercial Computing & Services

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

Microfocus International

GENERAL DESCRIPTION OF THIS BUSINESS

International software company

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:

01 / **01** / **19** ____ / **19**
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Agilent Technology

GENERAL DESCRIPTION OF THIS BUSINESS

Testing Equipment

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

Hewlett Packard Incorporated

GENERAL DESCRIPTION OF THIS BUSINESS

Personal computing, peripherals, ink

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

Frontier Communications

GENERAL DESCRIPTION OF THIS BUSINESS

Telecommunications

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

Verizon

GENERAL DESCRIPTION OF THIS BUSINESS

Telecommunications

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)

CALIFORNIA FORM **700**
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Ann Schneider

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

[REDACTED]

CITY

Mountain View

FAIR MARKET VALUE

\$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

____ / ____ / **19** ____ / ____ / **19**

ACQUIRED DISPOSED

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

Tenants: Jacob Melcher, Cooper Knack, Jessie Zhang

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE

\$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:

____ / ____ / **19** ____ / ____ / **19**

ACQUIRED DISPOSED

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)

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
Ann Schneider

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Townhome Rental Property

ADDRESS (Business Address Acceptable)

430 Hillwood Ct, Mountain View, CA 94040

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Residential rental property

YOUR BUSINESS POSITION

Owner, Property Manager

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
430 Hillwood Ct., Mountain View, CA 94040
(Describe)

Other _____
(Describe)

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

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 _____
(Describe)

► 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*

INTEREST RATE

TERM (Months/Years)

ADDRESS (Business Address Acceptable)

_____ % None

BUSINESS ACTIVITY, IF ANY, OF LENDER

SECURITY FOR LOAN

None Personal residence

HIGHEST BALANCE DURING REPORTING PERIOD

Real Property _____

Street address

\$500 - \$1,000

\$1,001 - \$10,000

City

\$10,001 - \$100,000

Guarantor _____

OVER \$100,000

Other _____

(Describe)

Comments: _____

Name

Ann Schneider

SCHEDULE D
Income – Gifts

► NAME OF SOURCE (Not an Acronym)

Housing Leadership Council

ADDRESS (Business Address Acceptable)

HLC 2905 S El Camino Real, San Mateo, CA 94403

BUSINESS ACTIVITY, IF ANY, OF SOURCE

NGO Advocating for Housing

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 28 / 19	\$ 100.00	Waived registratio fee for
		housing summit at CSM

► NAME OF SOURCE (Not an Acronym)

South San Francisco Scavengers

ADDRESS (Business Address Acceptable)

500 E. Jamie Ct., SSF, CA 94080

BUSINESS ACTIVITY, IF ANY, OF SOURCE

City of Millbrae's franchised garbage and recycling provider

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 19 / 19	\$ 65	Holiday Gift Baskquet
12 / 07 / 19	\$ 60	Annual Holiday Dinner th
11 / / /	\$	

► 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)

San Mateo Labor Council

ADDRESS (Business Address Acceptable)

SMLC 1153 Chesa Dr. Suite 200, Foster City CA 94404

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Labor Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 06 / 2019	\$ 65.00	Holiday Party Admission
07 / 26 / 19	\$ 65.00	COPE Banquet Dinner tic

► NAME OF SOURCE (Not an Acronym)

City of Hanyu, Saitama Prefecture, Japan

ADDRESS (Business Address Acceptable)

6-15 Azuma, Hanyu-shi,

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Friendship City Hanyu Japan, 65th Birthday, part of delegation to

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 07 / 19	\$ 750.00	Hotel, group bus travel
11 / 12 / 19	\$	and group meals

► 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: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM **700**
 FAIR POLITICAL PRACTICES COMMISSION

Name

Ann Schneider

- Mark either the gift or income box.
- Mark the “501(c)(3)” box for a travel payment received from a nonprofit 501(c)(3) organization or the “Speech” box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

► NAME OF SOURCE (*Not an Acronym*)

City of Hanyu, Saitama Prefecture, Japan

ADDRESS (*Business Address Acceptable*)

6-15 Azuma, Hanyu-shi,

CITY AND STATE

Hanyu, Saitama, SA 348-8601

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

Sister City Exchange -

DATE(S): 11 / 7 /19 - 11 / 12 /19 AMT: \$ 750.00
 (If gift)

► MUST CHECK ONE: Gift -or- Income

Made a Speech/Participated in a Panel

Other - Provide Description Presented proclamation from Ci

► If Gift, Provide Travel Destination Paid own flight from SFO to Hanyu

► NAME OF SOURCE (*Not an Acronym*)

ADDRESS (*Business Address Acceptable*)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): / / - / / AMT: \$
 (If gift)

► MUST CHECK ONE: Gift -or- Income

Made a Speech/Participated in a Panel

Other - Provide Description

► If Gift, Provide Travel Destination

► NAME OF SOURCE (*Not an Acronym*)

ADDRESS (*Business Address Acceptable*)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): / / - / / AMT: \$
 (If gift)

► MUST CHECK ONE: Gift -or- Income

Made a Speech/Participated in a Panel

Other - Provide Description

► If Gift, Provide Travel Destination

► NAME OF SOURCE (*Not an Acronym*)

ADDRESS (*Business Address Acceptable*)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): / / - / / AMT: \$
 (If gift)

► MUST CHECK ONE: Gift -or- Income

Made a Speech/Participated in a Panel

Other - Provide Description

► If Gift, Provide Travel Destination

Comments: Hanyu is a Friendship City with Millbrae, five city representatives were chosen to attend the 65th birthday of the City of Hanyu. I

I paid my own way to Japan but once in Japan, we traveled with other Sister City delegates from other countries by bus and group meals. Our ho