

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received  
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COVER PAGE  
A PUBLIC DOCUMENT  
CITY OF FOSTER CITY/  
EMIO

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Froomin Jon Franklin

20 JUL 27 PM 4:11

RECEIVED

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Foster City

Division, Board, Department, District, if applicable

Your Position

City Council Candidate

► 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

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

☐ Multi-County

☐ County of

☒ City of Foster City

☐ 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.

-or-

☐ Assuming Office: Date assumed / /

☐ The period covered is / / through  
the date of leaving office.

☒ Candidate: Date of Election 11/03/2020 and office sought, if different than Part 1:

4. Schedule Summary (must complete)

► Total number of pages including this cover page: 2

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)

, Foster City, CA 94404

DAYTIME TELEPHONE NUMBER

( 650 )

EMAIL ADDRESS

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 July 24, 2020

(month, day, year)

Signature

(File the originally signed paper statement with your filing official.)

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>Jon Franklin Froomin</b>

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME  
**Managment Partners**

ADDRESS (Business Address Acceptable)  
**Cincinnati, OH 45206**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Government Consulting**

YOUR BUSINESS POSITION  
**Special Advisor**

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)

▶ 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\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

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

INTEREST RATE \_\_\_\_\_% ☐ None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN  
☐ None ☐ Personal residence  
☐ Real Property \_\_\_\_\_  
Street address \_\_\_\_\_  
City \_\_\_\_\_  
☐ Guarantor \_\_\_\_\_  
☐ Other \_\_\_\_\_  
(Describe)

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