## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

#### STATEMENT OF ECONOMIC INT. ESTS **COVER PAGE** A PUBLIC DOCUMENT

Date Initial Filing Received
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CITY OF FOSTER CITY/ EMID

Please type or print in ink.		20 8190	2 14 0 1 4
NAME OF FILER (LAST)	(FIRST)	ZU AUB	3 AM O(MIDDEE)
Hindi	Sam	DEC	FIVED
1. Office, Agency, or Court		2 t (may 1)	Danie S. B. Boom Starf
Agency Name (Do not use acronyms)			
City of Foster City			
Division, Board, Department, District, if applicab	e	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 Jud (Statewide Jurisdiction)	lge, or Court Commissioner
Multi-County		County of	
✓ City of Foster City		[7] 04	
3. Type of Statement (Check at least one	box)		
Annual: The period covered is January 1, December 31, 2019.		Leaving Office: Date Left(Check one	
The period covered is/ December 31, 2019.	, through	<ul> <li>The period covered is January leaving office.</li> </ul>	1, 2019, through the date of
Assuming Office: Date assumed	Annual Communication of the Co	The period covered is/. the date of leaving office.	, through
Candidate: Date of Election November :	3, 2020 and office sought, i	f different than Part 1:	
4. Schedule Summary (must comple	te) ► Total number o	of pages including this cover pag	e: ঽ
Schedules attached			
✓ Schedule A-1 - Investments – schedule	attached	Schedule C - Income, Loans, & Business	Positions - schedule attached
Schedule A-2 - Investments – schedule		Schedule D - Income - Giffs - schedule a	
Schedule B - Real Property - schedule	attached	Schedule E - Income - Gifts - Travel Pay	ments - schedule attached
-or- ☐ None - No reportable interests	on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docum	CITY ent)	STATE	ZIP CODE
	Foster City	CA	94404
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(510 )		s	
I have used all reasonable diligence in preparing herein and in any attached schedules is true an	d complete. I acknowledge th	nis is a public document.	wledge the information contained
I certify under penalty of perjury under the la	ws of the State of California	a that the foregoing is true and correct.	
<b>Date Signed</b> 07/31/2020	Qia.	nature	
(month, day, year)		(File the originally signed paper states	nent with your filing official.)

#### **SCHEDULE A-1** Investments

# Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Sam							
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► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Gilead Sciences, Inc.	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Biotech	
FAIR MARKET VALUE	FAIR MARKET VALUE
<b>₹2,000 - \$10,000</b>	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT
(Describe)  Partnership () Income Received of \$0 - \$499	(Describe)  Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	☐ Farthership ☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Visa	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Technology, Payment	
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	☐ Partnership ○ Income Received of \$0 - \$499
Thousand Necessad of \$500 of World (Report on Scriedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
///	
ACQUIRED DISPOSED	
► NAME OF BUSINESS ENTITY	
NAME OF BOSINESS ENTITY	► NAME OF BUSINESS ENTITY
OFNERAL RECORDERION OF THE PHONE	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000
<del>_</del>	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Stock	NATURE OF INVESTMENT Stock Other
(Describe)  Partnership () Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//19/ / 19	/ /19 / /19
ACQUIRED DISPOSED	ACQUIRED DISPOSED
'	
Comments:	

### SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 70	(0)
FAIR POLITICAL PRACTICES COMMISS	NOI
Name	
Sam Hindi	

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Sam Hindi	
Name	Name
Hillsdale Arco	
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$2,000 - \$10,000 	\$0 - \$1,999 \$2,000 - \$10,000 \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$10,001 - \$100,000 ACQUIRED DISPOSED
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000
A Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
☐ Partnership ☐ Sole Proprietorship ☑ corporation Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION President	VOUR RUSINESS ROSITION
	YOUR BUSINESS POSITION
<ul> <li>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</li> </ul>	<ul> <li>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)</li> </ul>
☐ \$0 - \$499 ☐ \$10,001 - \$100,000 ☐ \$500 - \$1,000 ☐ OVER \$100,000	☐ \$0 - \$499 ☐ \$10,001 - \$100,000 ☐ \$500 - \$1,000 ☐ OVER \$100,000
\$1,001 - \$10,000	\$1,001 - \$10,000
► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
Thore of Traines listed below	None or Names listed below
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	A INVESTMENTS AND INTEGRATE IN SECTION
LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or	Nome of Dusiness Fulfill, if Lands
Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR AAA BURNA AAAA	
\$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000/	\$10,001 - \$100,000/
\$100,001 - \$1,000,000 ACQUIRED DISPOSED  Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	
Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
- Leasehold	
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property
and amounted	are attached
Comments:	•