

**RECEIVED**

MAY 24 2022

City Clerk's Office  
City of Santa Clara



**City of  
Santa Clara**  
The Center of What's Possible

**CITY COUNCIL WRITTEN PETITION**

Please provide the information requested below. When complete, please submit to the City Clerk's Office, 1500 Warburton Avenue, Santa Clara, CA 95050.

Date: May 24, 2022

I, Brian Doyle, am hereby requesting to be placed on the Santa Clara City Council Agenda for the following purpose:

An explanation by Councilmember Kevin Park of the apparent inconsistent statements in  
official filings regarding his employment and sources of income. The details of the  
inconsistent statements and copies of public records demonstrating the inconsistencies  
are attached.

I understand that it is important that I attend the meeting in the event there are any questions the Council wishes to ask me.

Signed:

NAME: Brian Doyle

ADDRESS: Council District 5

Street

Santa Clara 95050

City Zip Code

TELEPHONE: \* \_\_\_\_\_

Optional

DATE: May 24, 2022

\*NOTE: This is a public document. If your telephone number is unlisted or if you do not want it to be public, please provide an alternate number where you can be reached.

## WRITTEN PETITION REGARDING KEVIN PARK

There are some serious inconsistencies in official filings by Councilmember Kevin Park that indicate at best an unacceptable level of deceit and at worst perjury.

On August 4, 2020 Kevin Park filed a Statement of Economic Interest (Form 700) in conjunction with his candidacy on which he declared that he had no reportable interests of any kind. (Attachment 1) He signed his name under the statement: "I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct."

The following is a screenshot of the signature portion of Mr. Park's August 4, 2020 Statement:

-or-  **None** - No reportable interests on any schedule

### 5. Verification

MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
<i>(Business or Agency Address Recommended - Public Document)</i>				
[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 4 August 2020  
*(month, day, year)*

Signature [REDACTED]  
*(File the originally signed paper statement with your filing official)*

The instructions for Form 700 contain the following requirement:

### Candidate Statement:

If you are filing a statement in connection with your candidacy for state or local office, investments, interests in real property, and business positions held on the date of filing your declaration of candidacy must be reported. In addition, income (including loans, gifts, and travel payments) received during the 12 months prior to the date of filing your declaration of candidacy is reportable. Do not change the preprinted dates on Schedules A-1, A-2, and B.

On August 6, 2020, Mr. Park signed and filed an Official Filing Form entitled Ballot Designation Worksheet (Attachment 2) in which he stated his justification for his ballot designation as "Manager" to be his job title for his employer "TCS" and that he held the job from February 2017 through "present" (i.e. August 6, 2020).

The following is a screenshot of the relevant portion of Mr. Park's Worksheet:

Page 3.

Justification for use of 3 <sup>rd</sup> PVO: <u>Job Title</u>	
Current or most recent job title: <u>Manager</u>	Start/End Dates: <u>Feb 2017 - present</u>
Employer Name or Business: <u>TCS</u>	
Person who can verify this information:	
Name: <u>Georgina Lopez</u>	Phone Number(s): [REDACTED] Email: [REDACTED]

Before signing below, answer/initial the following questions. Does your proposed ballot designation:

- |   |   |                   |
|---|---|-------------------|
| 1) Use only a portion of the title of your current elected office?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 2) Non-judicial candidates: Use only the word "incumbent" for an elective office to which you were appointed?                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 3) Use more than three total words for your principal professions, vocations, or occupations?                                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 4) Suggest an evaluation of you, such as outstanding, leading, expert, virtuous, or eminent?                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 5) Refer to a status (Veteran, Activist, Founder, Scholar), rather than a profession, vocation, or occupations?                 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 6) Abbreviate the word "retired"?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 7) Place the word "retired" after the words it modifies? Example: Accountant, retired   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 8) Use an word or prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 9) Use the word "retired" along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher        | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 10) Use the name of a political party or political body?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 11) Refer to a racial, religious, or ethnic group?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |
| 12) Refer to any activity prohibited by law?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>GP</u> |

If the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.

X	<u>[Signature]</u>	8	1	6	1	2020
	Candidate's Signature	Date Signed:	Month	Day	Year	

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at [www.sos.ca.gov](http://www.sos.ca.gov)).

Rev 09/2019

The August 6, 2020 filing clearly states that Mr. Park was employed by "TCS" from February 2017 through at least the date of filing. Yet Mr. Park never declared any income from TCS on his August 6 Statement of Financial Interest as he was required to do.

On December 22, 2020 Mr. Park filed his "Assuming Office" Statement of Financial Interest (Form 700). (Attachment 3) He again declared that he had no reportable interests of any kind. He signed his name under that statement: "I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct."

The following is a screenshot of the signature portion of Mr. Park's December 22, 2020 Statement:

-or-  None - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS <small>(Business or Agency Address Recommended - Public Document)</small>	STREET	CITY	STATE	ZIP CODE
[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 December 22, 2020      Signature [REDACTED]  
(month, day, year)

The instructions for Form 700 contain the following requirement:

**Assuming Office Statement:**

If you are a newly appointed official or are newly employed in a position designated, or that will be designated, in a state or local agency's conflict of interest code, your assuming office date is the date you were sworn in or otherwise authorized to serve in the position. If you are a newly elected official, your assuming office date is the date you were sworn in.

- Report: Investments, interests in real property, and business positions held on the date you assumed the office or position must be reported. In addition, income (including loans, gifts, and travel payments) received during the 12 months prior to the date you assumed the office or position.

Mr. Park was sworn in as a Santa Clara City Councilmember on December 8, 2020. Thus, he was required to report his income from the prior 12 month period beginning December 7, 2020, including any income received from TCS. Instead, he stated under penalty of perjury that he had no reportable financial interests.

In Mr. Park's latest Form 700 filed on April 1, 2022 (Attachment 4) he states under penalty of perjury that he received over \$100,000 in income from Tata America for the period of January 1, 2021 through December 31, 2021:

▶ 1. INCOME RECEIVED	
NAME OF SOURCE OF INCOME	
Tata America	
ADDRESS (Business Address Acceptable)	
Edison, NJ 08837	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	
Technical Consultancy and Engineering	
YOUR BUSINESS POSITION	
Senior Manager	
GROSS INCOME RECEIVED	
<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	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
<input checked="" type="checkbox"/> Salary	<input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	
<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)	
<input type="checkbox"/> Loan repayment	
<input type="checkbox"/> Commission or _____	<input type="checkbox"/> Rental Income, list each source of \$10,000 or more
	(Describe)
<input type="checkbox"/> Other _____	
	(Describe)

The foregoing public records raise the following questions:

- Councilmember Park was required to have declared his sources of income from the twelve month periods beginning in August 5, 2019 and December 7, 2019, yet he states under penalty of perjury on two separate occasions that he has none.
- At the same time, he states in his Official Filing Form entitled Ballot Designation Worksheet that he worked at TCS from February 2017 at least through August 6, 2020. TCS stands for Tata Consulting Services.
- Then in his April 1, 2022 Form 700 he states that he earned more than \$100,000 from Tata America during calendar year 2021.
- Did Mr. Park really stop earning any income from TCS after August 5, 2019 and then start earning income from Tata America sometime in 2021?
- If so, how could he afford to live in Santa Clara?
- Did Mr. Park falsely state on his Official Filing Form that he was still employed as a Manager by TCS on August 4, 2020?

- Or did Mr. Park really have income in the period from August 2019 through December 2020, and he committed perjury when he filed his two Form 700's in 2020?

I hereby request the City Council to place an item on a future agenda to allow Mr. Park to answer these questions. Please do not vote to cover up Mr. Park's apparent dishonesty about his sources of income.

RECEIVED  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

CITY OF SANTA CLARA  
OFFICE OF THE CITY CLERK

Please type or print in ink.

NAME OF FILER (LAST) Park  
2020 AUG 31 4:35 PM (FIRST) Kevin  
2020 AUG -6 PM (MIDDLE) 12:27 N

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
City of Santa Clara

Division, Board, Department, District, if applicable  
District 4

Your Position  
Member, City Council

► 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 Santa Clara

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 3 November 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 STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)

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 4 August 2020  
(month, day, year)

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

ATTACHMENT 1

BALLOT DESIGNATION WORKSHEET

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

CITY OF SANTA CLARA  
2020 AUG -6 PM 12:26

This entire form must be completed, or it will not be accepted and you will not be entitled to a ballot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If information requested is not applicable, please write "N/A" in the space provided, otherwise the information MUST be provided. UPON FILING, THIS WORKSHEET WILL BE A PUBLIC RECORD.

**Candidate Information** 1

Candidate Name: Kevin Nara Park Gender (optional, for translation use only): Male Select from Drop Down Menu

Office: City of Santa Clara, Member, City Council, District 4 Email: SANTACLARAKEVIN@gmail.com

Home Address: [REDACTED], SANTA CLARA, CA 95051

Mailing Address: Same

Business Address: same

Phone Number(s) Business: N/A Home/Mobile: [REDACTED] Fax: N/A

**Attorney Information** 2

Attorney Name (or other person authorized to act on your behalf): N/A

Address: N/A

Phone Number(s) Business: N/A Mobile: N/A Fax: N/A

You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

**Proposed Ballot Designation(s)** 3

Proposed Ballot Designation(s): Scientist/Engineer/Manager

Alternate Ballot Designation(s) 1: Engineer/Manager

Alternate Ballot Designation(s) 2: \_\_\_\_\_

In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. Do not submit originals.

It is your responsibility to justify your proposed ballot designation and to provide all requested details.

If your proposed ballot designation includes the word "volunteer," indicate the title of your volunteer position and the name of the entity for which you volunteer along with a brief description of the type of volunteer work you do and the approximate amount of time involved. You may only use the ballot designation "community volunteer" if you volunteer for a 501(c)(3) charitable, educational, or religious organization, a governmental agency or an educational institution. You may not use "community volunteer" together with another designation.



If your proposed ballot designation contains one or more slashes ("/") separating multiple principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.

Justification for use of Proposed Ballot Designation(s)  
If you are proposing alternate ballot designations, please provide justification for use of those on Page 3.

Justification for use of 1 <sup>st</sup> PVO: Degree and work done	
Current or most recent job title: Bachelor of Science	Start/End Dates: June 1989 - June 1993
Employer Name or Business: Caltech	
Person who can verify this information:	
Name: Nate Lewis c/o Caltech	Phone Number(s): [Redacted] Email:
Justification for use of 2 <sup>nd</sup> PVO: Degree and work done	
Current or most recent job title: MS in Mechanical Engineering	Start/End Dates: June 1993 - June 1995
Employer Name or Business: Stanford	
Person who can verify this information:	
Name: Stanford Alumni Association	Phone Number(s): [Redacted] Email:
Justification for use of 3 <sup>rd</sup> PVO: Job Title	
Current or most recent job title: Manager	Start/End Dates: Feb 2017 - present
Employer Name or Business: TCS	
Person who can verify this information:	
Name: Georgina Lopez	Phone Number(s): [Redacted] Email:

Before signing below, answer/initial the following questions. Does your proposed ballot designation:

- |   |   |                  |
|---|---|------------------|
| 1) Use only a portion of the title of your current elected office?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 2) Non-judicial candidates: Use only the word "incumbent" for an elective office to which you were appointed?                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 3) Use more than three total words for your principal professions, vocations, or occupations?                                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 4) Suggest an evaluation of you, such as outstanding, leading, expert, virtuous, or eminent?                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 5) Refer to a status (Veteran, Activist, Founder, Scholar), rather than a profession, vocation, or occupations?                 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 6) Abbreviate the word "retired"?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 7) Place the word "retired" after the words it modifies? Example: Accountant, retired   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 8) Use an word or prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 9) Use the word "retired" along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher        | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 10) Use the name of a political party or political body?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 11) Refer to a racial, religious, or ethnic group?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |
| 12) Refer to any activity prohibited by law?  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>R</u> |

If the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.

X  8 | 6 | 2020

Candidate's Signature Date Signed: Month Day Year

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at [www.sos.ca.gov](http://www.sos.ca.gov)).



COMPLETE THIS PAGE ONLY IF one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please initial:   R  

Justification for  
 Alternate Ballot  
 Designation(s) 1

A

Justification for use of 1 <sup>st</sup> PVO:		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:
Justification for use of 2 <sup>nd</sup> PVO:		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:
Justification for use of 3 <sup>rd</sup> PVO:		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:

Justification for  
 Alternate Ballot  
 Designation(s) 2

B

Justification for use of 1 <sup>st</sup> PVO:		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:
Justification for use of 2 <sup>nd</sup> PVO:		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:
Justification for use of 3 <sup>rd</sup> PVO:		
Current or most recent job title:	Start/End Dates:	
Employer Name or Business:		
Person who can verify this information:		
Name:	Phone Number(s):	Email:

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

Date Initial Filing Received  
Filing Official Use Only

CITY OF SANTA CLARA  
OFFICE OF THE FAIR POLITICAL PRACTICES COMMISSION

2020 DEC 22 PM 3:59

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
PArk Kevin N

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

Agency Name (Do not use acronyms)

City of Santa Clara

Division, Board, Department, District, if applicable

City Council District 4

Your Position

Councilmember

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

Agency: Stadium Authority

Position: Board Member

*See Attached*

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FAIR POLITICAL  
PRACTICES COMMISSION  
2021 NOV -8 PM 3:22

**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 Santa Clara

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 12 / 08 / 2020

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: 1**

**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)

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 December 22, 2020  
(month, day, year)

Signature

ATTACHMENT 3

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A Public Document

Date Initial Filing Received  
Filing Official Use Only

E-Filed  
04/01/2022  
14:06:51  
Filing ID:  
203335237

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Park, Kevin

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
City of Santa Clara  
Division, Board, Department, District, if applicable  
Oversight Board for Successor Agency to the City of Santa Clara Redevelopment Agency  
Your Position  
Board Member

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

Agency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS 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 Santa Clara  Other

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2021 through December 31, 2021.  Leaving Office: Date Left (Check one circle)
- or-  The period covered is through December 31, 2021.  The period covered is January 1, 2021 through the date of leaving office.
- Assuming Office: Date assumed  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: 6

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)  
Santa Clara CA 95050  
DAYTIME TELEPHONE NUMBER E-MAIL 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 04/01/2022 (month, day, year)

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

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
**Expanded Statement Attachment**

<b>CALIFORNIA FORM 700</b>
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name
Kevin Park

\* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #
City of Santa Clara	Oversight Board for Successor Agency to the	Board Member	Annual 1/1/2021 - 12/31/2021	091600143-NFH-0143
City of Santa Clara	Bayshore North Project Enhancement Authority	Boardmember	Annual 1/1/2021 - 12/31/2021	091600143-NFH-0143
City of Santa Clara	Housing Authority	Boardmember	Annual 1/1/2021 - 12/31/2021	091600143-NFH-0143
City of Santa Clara	Stadium Authority	Boardmember	Annual 1/1/2021 - 12/31/2021	091600143-NFH-0143
City of Santa Clara	Industrial Development Authority	Boardmember	Annual 1/1/2021 - 12/31/2021	091600143-NFH-0143
City of Santa Clara	Sports and Open Space Authority	Boardmember	Annual 1/1/2021 - 12/31/2021	091600143-NFH-0143
City of Santa Clara	Mayor and City Council	Councilmember	Annual 1/1/2021 - 12/31/2021	091600143-NFH-0143
City of Santa Clara	Joint Financing Authority	Director	Annual 1/1/2021 - 12/31/2021	091600143-NFH-0143
City of Santa Clara	Public Facilities Financing Authority	Director	Annual 1/1/2021 - 12/31/2021	091600143-NFH-0143



## SCHEDULE C

### Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

Park, Kevin \_\_\_\_\_

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Tata America

ADDRESS (Business Address Acceptable)  
Edison, NJ 08837

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Technical Consultancy and Engineering

YOUR BUSINESS POSITION  
Senior 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

\_\_\_\_\_  
 (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: \_\_\_\_\_

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
 Name \_\_\_\_\_  
 Park, Kevin

**SCHEDULE D**  
**Income – Gifts**

▶ NAME OF SOURCE (Not an Acronym)  
 Consulate General of the Republic of Korea in San Francisco  
 ADDRESS (Business Address Acceptable)  
 San Francisco, CA 94118  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Consul General of South Korea

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 08 / 21	\$ 110.14	Korean-American Next Generation Networking
07 / 10 / 21	\$ 80.00	Korean-American Leadership Seminar
05 / 12 / 21	\$ 100.00	Dinner with the Consul General

▶ 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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

<b>CALIFORNIA FORM 700</b>
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name _____
Park, Kevin _____

- 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)  
Overseas Korean Foundation

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

CITY AND STATE  
Seoul, Na Na

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Educate and inform Koreans abroad and connect them to Korean communities

DATE(S): 08 / 18 / 21 - 08 / 19 / 21 AMT: \$ 1,190.00  
*(If gift)*

▶ MUST CHECK ONE:       Gift -or-     Income

Made a Speech/Participated in a Panel

Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination Jeju, South Korea

▶ 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:** Reimbursed for travel to the Overseas Korean Foundation forum where I gave a presentation and participated in a discussion panel.