



Candidate Name: Mai Vang  
Office Sought: Sacramento City Council, District 8  
Ballot Designation: Sacramento City Councilmember, District 8  
Code of Fair Campaign Practices:  Yes  No  
Candidate Statement:  Yes  No  
FPPC Form 700: attached  
FPPC Campaign Filing Documents: [link to filings online](#)

Occupation: Sacramento City Councilmember

Statement: I am running to represent you on the Sacramento City Council for the same reasons why I started - to make sure our community is treated fairly.

In my first term, we secured over \$25 million of investments for our parks, streets, public libraries, and trails. We led the effort to secure \$8 million annually for the Sacramento Children's Fund and expanded more affordable housing in South Sacramento to prevent families from homelessness.

Our work is not yet done. For every 1 person we house, 3 more become homeless. We must continue to fight and protect every resident so that our neighbors are not sleeping on our streets.

Born and raised in South Sacramento, I will never stop fighting to protect our community. I will continue to fight for more affordable housing, expand programs for seniors and families, fight for our fair share of economic development resources, and the same respect that every other Sacramento neighborhood receives from City Hall.

Our Sacramento Area Fire Fighters and the National Union of Healthcare Workers have endorsed me to represent our working families. I'd be honored to have your vote on Tuesday, March 5. Vote Mai Vang and join us at [www.maivang.org](http://www.maivang.org)

Campaign Website	<a href="http://www.maivang.org">www.maivang.org</a>
Campaign Address	1700 Tribute Road, Suite 201 Sacramento, CA 95815
Campaign Phone Number	916-440-2606
Campaign Manager	Amy Yang
Campaign Media Contact	Jonathan Tran
Campaign Media Email	<a href="mailto:contact@maivang.org">contact@maivang.org</a>
Campaign Media Phone	916-440-2606

*(Campaign information is provided by the candidate, the Office of the City Clerk does not validate the information provided.)*

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

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Vang, Mai Y

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

Agency Name (Do not use acronyms)  
CITY OF SACRAMENTO  
Division, Board, Department, District, if applicable  
Mayor and Council Office Your Position  
City Council 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 Sacramento  
 City of Sacramento  Other Multi-Jurisdiction

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

Annual: The period covered is January 1, 2022, through December 31, 2022.  
-or- The period covered is \_\_\_\_\_, through December 31, 2022.  
 Assuming Office: Date assumed \_\_\_\_\_  
 Leaving Office: Date Left \_\_\_\_\_ (Check one circle.)  
 The period covered is January 1, 2022, through the date of leaving office.  
-or-  The period covered is \_\_\_\_\_, through the date of leaving office.  
 Candidate: Date of Election 03/05/2024 and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary (required)**

▶ Total number of pages including this cover page: 7

**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  
915 I Street, 5th Floor, Sacramento, CA 95814  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
(916) 808-7008 myvang@cityofsacramento.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 11/30/2023 Signature [Signature]  
(month, day, year) (File the originally signed paper statement with your filing official.)

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

<b>CALIFORNIA FORM 700</b>	
FAIR POLITICAL PRACTICES COMMISSION	
Name	Mai Y Vang

\* 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 SACRAMENTO	Mayor and Council Office	City Council Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Freeport Regional Water Authority		Associate Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Regional Human Rights/Fair Housing Commission		Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Sacramento Area Flood Control Agency		Alternate Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Sacramento Area Sewer District Board		Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Sacramento Groundwater		Alternate Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Sacramento Metropolitan Air Quality Management District		Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Sacramento Metropolitan Cable Commission		Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Sacramento Public Library Authority		Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Sacramento Regional County Sanitation District		Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Sacramento Transportation Authority		Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007
Sacramento Employment and Training Agency		Board Member	Annual 1/1/2022 - 12/31/2022	021300007-NFH-0007

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

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name  
Mai Y Vang

\* 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 #
Sacramento County Sanitation Districts Financing Authority	Board	Board Member	Annual 1/1/2022 - 12/31/2022	
Sacramento Area Council of Governments	Board	Board Member	Annual 1/1/2022 - 12/31/2022	



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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
City of Sacramento

ADDRESS (Business Address Acceptable)  
915 I Street, 5<sup>th</sup> Floor, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Local Government

YOUR BUSINESS POSITION  
City Councilmember

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: \_\_\_\_\_

**SCHEDULE D  
Income – Gifts**

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
Sacramento Central Labor Council, AFL-CIO  
ADDRESS (Business Address Acceptable)  
2617 K Street, #175, Sacramento, CA 95816  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04/01/23</u>	<u>\$ 150.00</u>	<u>2 Tickets to Crab Feed Event</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
The Greater Sacramento National Association for the Advancement of Colored People  
ADDRESS (Business Address Acceptable)  
4625 44th Street, Suite 15, Sacramento, CA 95820  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04/27/23</u>	<u>\$ 50.00</u>	<u>2 Ticket to 41st Annual Prayer Breakfast Event</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
Kaiser Permanente Foundation Health Plan, Inc.  
ADDRESS (Business Address Acceptable)  
6600 Bruceville Rd, Sacramento, CA 95823  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
2023 Cap to Cap Participant in Conference

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04/23/23</u>	<u>\$ 231.96</u>	<u>Partial Underwriting of Dinner on program</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
California Asian Pacific Chamber of Commerce  
ADDRESS (Business Address Acceptable)  
1610 R Street, Suite 300, Sacramento, CA 95811  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06/29/23</u>	<u>\$ 110.40</u>	<u>2 Tickets to California Diversity Awards Event</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
Cal Expo / California State Fair  
ADDRESS (Business Address Acceptable)  
PO BOX 15649, Sacramento, CA 95852  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>07/26/23</u>	<u>\$ 393.00</u>	<u>California State Fair Tickets + parking passes</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
Visit Sacramento  
ADDRESS (Business Address Acceptable)  
1608 I Street, Sacramento, CA 95814  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Tourism promotion and events

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09/10/23</u>	<u>\$ 600.00</u>	<u>2 tickets to Tower Bridge Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: The 06/29/2023 gift by the California Asian Pacific Chamber of Commerce was in conjunction with the California African American and Hispanic Chambers of Commerce.

**SCHEDULE D  
Income – Gifts**

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
 Name \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
Sol Blume LLC  
 ADDRESS (Business Address Acceptable)  
1029 H Street, Suite 206, Sacramento CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06/20/23</u>	<u>\$ 400.00</u>	<u>7 pass to 2023 Sol Blume Festival</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
La Familia Counseling Center, Inc  
 ADDRESS (Business Address Acceptable)  
5523 34<sup>th</sup> Street, Sacramento, CA 95820  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10/12/23</u>	<u>\$ 50.00</u>	<u>7 ticket to 50th Anniversary Celebration</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ 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: \_\_\_\_\_