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STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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AUG - 9 2024

A PUBLIC DOCUMENT

Notice Jennifer City Clerk's Office	NAME OF FILER (LAST)	(FIRST)	(MIDI	City of Menlo Park		
1. Office, Agency, Name (<i>Do not use acronyms</i>) Menio Park District 5 Division, Board, Department, District, if applicable **If sling for multiple positions, list below or on an attachment. (<i>Do not use acronyms</i>) Agency. Position **Position **Position of Office (Check at least one box) State	Wise	Jennifer				
Menlo Park District 5 Division, Board, Department, District, if applicable **Your Position** **If filing for multiple positions, list below or on an attachment. (Co not use acronyms) Agency: Position: Position:	1. Office, Agency, or	r Court		Old As Onice		
Division, Board, Department, District, if applicable Your Position Fiffling for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: Position: Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) Multi-County City of Menio Park Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) Multi-County County of County of County of County of Position: Annual: The period covered is January 1, 2023, through December 31, 2023. The period covered is Journal, 1, 2023, through the date of leaving office: Date Left December 31, 2023. Assuming Office: Date assumed The period covered is Journal, 1, 2023, through the date of leaving office. Candidate: Date of Election The period covered is Journal, 1, 2023, through the date of leaving office. Candidate: Date of Election The period covered is Journal, 1, 2023, through the date of leaving office. Candidate: Date of Election The period covered is Journal, 1, 2023, through the date of leaving office. Candidate: Date of Election The period covered is Journal, 1, 2023, through the date of leaving office. Candidate: Date of Election The period covered is Journal, 1, 2023, through the date of leaving office. Candidate: Date of Election The period covered is Journal, 1, 2023, through the date of leaving office. Candidate: Date of Election The period covered is Journal, 1, 2023, through the date of leaving office. The period covered is Journal, 1, 2023, through the date of leaving office. The period covered is Journal, 1, 2023, through the date of leaving office. The period covered is Journal, 1, 2023, through the date of leaving office. The period covered is Journal, 1, 2023, through the date of leaving office. Schedule Summary (required) Schedule Summary (required	Agency Name (Do not	use acronyms)				
Filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency	Menlo Park Distric	et 5	City Council Candidat	е		
Agency Position:	Division, Board, Departm	nent, District, if applicable	Your Position			
Agency Position:						
2. Jurisdiction of Office (Check at least one box) State	► If filing for multiple po	ositions, list below or on an attachment. (Do n	ot use acronyms)			
State Judge, Retired Judge, Pro Term Judge, or Court Commissioner (Statewide Jurisdiction) Multi-County County of County of Other	Agency:		Position:			
State Judge, Retired Judge, Pro Term Judge, or Court Commissioner (Statewide Jurisdiction) Multi-County County of County of Other	2 Jurisdiction of O	ffice (Check at least one hard				
Multi-County County of City of Menlo Park Other		THEE (Check at least one box)				
City of Menlo Park	State			Tem Judge, or Court Commissioner		
3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through December 31, 2023. The period covered is	Multi-County		County of			
3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through December 31, 2023. The period covered is	City of Menlo Pa	rk				
Annual: The period covered is January 1, 2023, through December 31, 2023. The period covered is January 1, 2023, through December 31, 2023. The period covered is January 1, 2023, through date of leaving office. The period covered is January 1, 2023, through the date of leaving office. Candidate: Date of Election 11/5/2024 and office sought, if different than Part 1: Candidate: Date of Election 11/5/2024 and office sought, if different than Part 1: Candidate: Date of Election 11/5/2024 and office sought, if different than Part 1: Schedule Summary (required) Schedules attached Schedule A-1 - Investments – schedule attached Schedule A-2 - Investments – schedule attached Schedule B - Real Property – schedule attached Schedule B - Real Property – schedule attached Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – Schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached The period covered is January 1, 2023, through the date of leaving office. The period covered is January 1, 2023, through the date of leaving office. The period covered is January 1, 2023, through the date of leaving office. The period covered is January 1, 2023, through the date of leaving office. The period covered is January 1, 2023, through the date of leaving office. The period covered is January 1, 2023, through the date of leaving office. The period covered is January 1, 2023, through the date of leaving office. The devine date of leaving office. Schedule D - Income - Cannuary 1, 2023, through the date of leaving office. Schedule D - Income - Gifts – Schedule attached Schedule D - Income - Gifts – Travel Payments – schedule attached Schedule D - Income - Gifts – Travel Payments – schedule attached Schedule D - Income - Gifts – Travel Payments – schedule attached Schedule D - Income - Gifts – Travel Payments – schedule attached Schedule D - Income - Gifts – Travel Payments – schedule attached MALING ADDRESS EMAIL ADDRESS EMAIL ADDRESS EMAIL ADDRESS EMAIL ADDRESS	3. Type of Statemer	nt (Check at least one box)				
December 31, 2023. (Check one circle.) The period covered is			Leaving Office: Date Lef	1 1		
The period covered is	December					
Assuming Office: Date assumed	The period		gh ☐ The period covered is	January 1, 2023, through the date		
the date of leaving office. Candidate: Date of Election	December	31, 2023.	of leaving office.			
and office sought, if different than Part 1:	Assuming Office:	Date assumed/				
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Schedule B - Real Property – schedule attached -Or- None - No reportable interests on any schedule 5. Verification MALLING ADDRESS (Business or Agency Address Recommended - Public Document) DAYTIME TELEPHONE NUMBER 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 Signature Schedule E - Income – Gifts – Travel Payments – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached State of Payments – schedule attached STATE ZIP CODE MENIO Payk CA 94025 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.						
MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) Mento Park CA 9402S 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 Signature Signature Signature Williams Williams Statement Williams 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. Signature Signature Williams Williams Williams Statement Williams Statement and correct.						
MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) Mento Park CA 9402S 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 Signature Signature Signature Williams Williams Statement Williams 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. Signature Signature Williams Williams Williams Statement Williams 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. Signature Signature Williams Statement Williams Statement and correct.				at the surface of the		
MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) Mento Pork CA 94025 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS 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 Signature Signature Whise	-or- None - No r	eportable interests on any schedule				
DAYTIME TELEPHONE NUMBER DAYTIME TELEPHONE NUMBER DAYTIME TELEPHONE NUMBER						
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 Signature Signature Difference 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. Signature Signature Difference 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. Signature			STATE	ZIP CODE		
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 Signature Signature Direction NUMBER EMAIL ADDRESS EMAIL ADDRESS EMAIL ADDRESS Signature The best of my knowledge the information contained the penalty of perjury under the laws of the State of California that the foregoing is true and correct.		Men	lo Park CA	94025		
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date Signed	DAYTIME TELEPHONE NUMBER	ER	EMAIL ADDRESS	1023		
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date Signed						
Date Signed 8/9/29 Signature Gennify Wise	have used all reasonable herein and in any attache	e diligence in preparing this statement. I have a ad schedules is true and complete. I acknowle	reviewed this statement and to the best of a adge this is a public document.	my knowledge the information contained		
	I certify under penalty of	of perjury under the laws of the State of Ca	lifornia that the foregoing is true and co	orrect.		
	Data Signad	0/0/20	Con wid.	71 Line		
	Date Signed	(mbnth, day, year)		aper statement with your filing official.)		

SCHEDULE A-1 Investments

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

Investments must be itemized. Do not attach brokerage or financial statements. CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION Jennifer Wise

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
APPLE INC.	NVIDIA CORPORATION
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Technology company.	Technology company.
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock (Describe)	Stock Other(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ 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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
VANGUARD TARGET RETIREMENT 2055 FUND	THRIFT SAVINGS PLAN - UNIFORM SERVICES
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
401k	401k
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499	Partnership Income Received of S0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
100 JULIUS SIGNIBARENNING BERGINE SHIMSTERS	1,916
//23//23 ACQUIRED DISPOSED	
	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GROUP IRA	THRIFT SAVINGS PLAN - CIVILIAN Lifecycle 2060
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
401k	401k
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499 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:
/ /23 / /23	/ /23 / /23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Topic or a second	Management of the second of th
Comments:	

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)



► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
RYAN DOUGLAS PROPERTIES, LLC	WISE FAMILY TRUST
Name Menlo Park, CA 94025 Address (Business Address Acceptable)	Menlo Park, CA 94025 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 Real estate investments.	GENERAL DESCRIPTION OF THIS BUSINESS Family living trust.
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
NATURE OF INVESTMENT Partnership Sole Proprietorship Other Member	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION METHODE	YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below	None or Names listed below None or Names listed below
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ■ REAL PROPERTY	INVESTMENT REAL PROPERTY
Ryan Douglas Properties, LLC	N/A
Name of Business Entity, if Investment, <u>or</u> 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
Real estate investments.	N/A
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 /23 /23	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$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 Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	1

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Jennifer Wise

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
BNY Mellon Wealth Management	Section of the sectio
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
San Francisco, CA 94105	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Wealth Management	Contragge-University (advisory strong absentation) workwareholds
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Client Strategist	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership, For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership, For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other	Other
(Describe)	(Describe)
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	ERIOD
a retail installment or credit card transaction, made in the	lending institution, or any indebtedness created as part of se lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
ADDITESS (Dasiness Address Acceptable)	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
S500 - \$1,000	6%
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
OVER \$100,000	man 1995
	Other(Describe)
	1
Comments:	