

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Imperial	Maria	Theresa

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City and County of San Francisco

Division, Board, Department, District, if applicable

Your Position

Planning Commission

Planning Commissioner

► 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)

<input type="checkbox"/> State	<input type="checkbox"/> Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
<input type="checkbox"/> Multi-County _____	<input checked="" type="checkbox"/> County of San Francisco
<input type="checkbox"/> City of _____	<input type="checkbox"/> Other _____

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

<input checked="" type="checkbox"/> Annual: The period covered is January 1, 2023, through December 31, 2023.	<input type="checkbox"/> Leaving Office: Date Left _____ / _____ / _____ (Check one circle.)
-or-	<input type="checkbox"/> The period covered is _____ / _____ / _____, through December 31, 2023.
<input checked="" type="checkbox"/> Assuming Office: Date assumed 07 / 01 / 2024	<input type="checkbox"/> The period covered is _____ / _____ / _____, through the date of leaving office.
<input type="checkbox"/> Candidate: Date of Election _____ and office sought, if different than Part 1: _____	<input type="checkbox"/> The period covered is _____ / _____ / _____, through the date of leaving office.

4. Schedule Summary (required)► **Total number of pages including this cover page:** _____**Schedules attached**

<input type="checkbox"/> Schedule A-1 - Investments – schedule attached	<input checked="" type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached
<input type="checkbox"/> Schedule A-2 - Investments – schedule attached	<input type="checkbox"/> Schedule D - Income – Gifts – schedule attached
<input type="checkbox"/> Schedule B - Real Property – schedule attached	<input type="checkbox"/> Schedule E - Income – Gifts – Travel Payments – schedule attached

-or- **None** - No reportable interests on any schedule**5. Verification**

MAILING ADDRESS (Business or Agency Address Recommended - Public Document)	STREET	CITY	STATE	ZIP CODE
1110 Howard St		San Francisco	CA	94103
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
(415) 996-5938		thrsimperial@gmail.com		

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 06/03/2024
(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)

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name _____

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Bill Sorro Housing Program/SF Study Center

ADDRESS (Business Address Acceptable)

1110 Howard St San Francisco, CA 94103

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

Executive Director

GROSS INCOME RECEIVED

<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> No Income - Business Position Only
<input checked="" type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> \$1,001 - \$10,000
	<input 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.)
--	--

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*

INTEREST RATE

TERM (Months/Years)

ADDRESS (Business Address Acceptable)

_____ % None

BUSINESS ACTIVITY, IF ANY, OF LENDER

SECURITY FOR LOAN

None Personal residence

HIGHEST BALANCE DURING REPORTING PERIOD

Real Property _____

Street address _____

\$500 - \$1,000

City _____

\$1,001 - \$10,000

Guarantor _____

\$10,001 - \$100,000

Other _____

(Describe) _____

Comments: _____