SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION AMENDMENT

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

Investments must be itemized.

Do not attach brokerage or financial statements.

Do not attach brokerage of	manda datamente.
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT	\$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT
Stock Other(Describe) Partnership Income Received of \$0 - \$499	Stock Other(Describe) Partnership Income Received of \$0 - \$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:// 21	IF APPLICABLE, LIST DATE://
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//21//21	/
NAME OF BUSINESS ENTITY	Filer's Verification
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name
FAIR MARKET VALUE	Office, Agency or Court
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	Statement Type 2021/2022 Annual Assuming Leaving (yr) Annual Candidate
NATURE OF INVESTMENT Stock Other(Describe)	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.
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed (month, day, year)
// 21	
	Filer's Signature

Comments: ___