

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

Date IniFILED, Received AUG 0 8 REC'D ALBANY CITY CLERK

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| Please | type | O | print | " | IIIM. |

| NAME O | F FILER (LAST) | | (FIRST) | (MIDDLE) | | | | |
|--|---|---|--|--|--|--|--|--|
| | GIAZ | MEN | JOLENE | CHRISTIA | | | | |
| 1. Off | | y, or Court | | | | | | |
| Age | ency Name (D | o not use acronyms) | | | | | | |
| (| ALBANY | BOARD OF | FOLLCATION | | | | | |
| | | epartment, District, if a | | Your Position | | | | |
| _ | BOARD | F COUCATION | | BOARD OF EDUCATION MEMBER | | | | |
| • | ► If filing for multiple positions, list below or on an attachment. (Do not use acronyms) | | | | | | | |
| | | | | | | | | |
| Ag | ency: | | | Position: | | | | |
| 2. Ju | risdiction | of Office (Check a | t least one box) | | | | | |
| | State | | | Judge, Retired Judge, Pro Tem Judge, or Court Commissioner | | | | |
| | Otalo | | | (Statewide Jurisdiction) | | | | |
| | Multi-County | | | County of | | | | |
| | / | | | Other | | | | |
| | | | | | | | | |
| 3. Iy | | ement (Check at lea | THE RELEASE THE SECTION OF THE SECTI | The second secon | | | | |
| | | e period covered is Jan cember 31, 2023. | uary 1, 2023, through | Leaving Office: Date Left/ | | | | |
| | -OF- | | , throu | ☐ The period covered is January 1, 2023, through the date | | | | |
| | | cember 31, 2023. | , unoc | of leaving office. | | | | |
| | Assuming O | ffice: Date assumed _ | | ☐ The period covered is, through the date of leaving office. | | | | |
| \checkmark | Candidate: | Date of Election | OVEMICEDS, and office so | ought, if different than Part 1: ALBOAN BOARD OF EDITION | | | | |
| 4. Sc | chedule Su | mmary (required |) ► Total num | ber of pages including this cover page: | | | | |
| Sc | chedules a | attached | | | | | | |
| | Schedule | A-1 - Investments - so | hedule attached | Schedule C - Income, Loans, & Business Positions - schedule attached | | | | |
| | Schedule | A-2 - Investments - so | hedule attached | Schedule D - Income - Gifts - schedule attached | | | | |
| | Schedule | B - Real Property - so | hedule attached | Schedule E - Income - Gifts - Travel Payments - schedule attached | | | | |
| | _/ | | | | | | | |
| -or- | | No reportable inte | rests on any schedule | | | | | |
| Section Profes | rification | | | | | | | |
| | ILING ADDRESS usiness or Agency A | STREET Address Recommended - Publ | ic Document) | Y STATE ZIP CODE | | | | |
| | | | | | | | | |
| DA | YTIME TELEPHON | E NUMBER | | EMAIL ADDRESS | | | | |
| | | | and this statement and to the heat of my leasured to the information contained | | | | | |
| l h | ave used all rear rein and in any | reviewed this statement and to the best of my knowledge the information contained edge 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. | | | | | | | | |
| | 707220000 | 10 | 2 1 | | | | | |
| Da | te Signed | August 8 (month, day, yea | 1024 | (Fige the originally signed paper statement with your liling ombial.) | | | | |