

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
GONZALES Mark Anthony

1. Office, Agency, or Court

Agency Name (Do not use acronyms) _____
Your Position
Sheriff Department Oversight Board
Division, Board, Department, District, if applicable
Commissioner
Sheriff Department Oversight Board
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)

State
 Multi-County _____
 City of San Francisco
 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
 County of San Francisco
 Other _____

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

Annual: The period covered is January 1, 2020, through December 31, 2020.
-or-
The period covered is _____ through _____
December 31, 2020.
 Assuming Office: Date assumed _____
-or-
The period covered is _____ through _____
the date of leaving office.

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) Total number of pages including this cover page: _____

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
(Business or Agency Address Recommended - Public Document)
1 Carlton B Goodlet Pl, Ste. 456 San Francisco CA. 94102
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(415) 5547225 sheriff@sfoq.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 10/26/2021 Signature _____
(month, day, year) (File the originally signed paper statement with your filing official)

Print

Clear