



STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

1289382

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Rubke, Cristina

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
Parking Authority Commissioner
► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS Position:

2. Jurisdiction of Office (Check at least one box)

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

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

Annual: The period covered is January 1, 2019 through December 31, 2019 Leaving Office: Date Left ____/____/____ (Check one circle)
-or- The period covered is ____/____/____, through December 31, 2019 The period covered is January 1, 2019 through the date of leaving office.
 Assuming Office: Date assumed ____/____/____ 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: 3

Schedules attached

Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached
 Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached
 Schedule B - Real Property - 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 South Van Ness, Seventh Floor San Francisco CA 94103
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(415) 701-4505 crubke@sflaw.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 03/06/2020
(month, day, year)

Signature Cristina Rubke
(File the originally signed paper statement with your filing official.)

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
Expanded Statement Attachment**

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Cristina Rubke

* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Division/Board/Dept/District	Position	Type of Statement
City and County of San Francisco	Parking Authority	Commissioner	Annual 1/1/2019 - 12/31/2019
City and County of San Francisco	Municipal Transportation Agency	Member, Board of Directors	Annual 1/1/2019 - 12/31/2019

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Rubke, Cristina

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Shartsis Friese LLP
ADDRESS (Business Address Acceptable)
One Maritime Plaza, 18th Floor
San Francisco, CA 94111
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law
YOUR BUSINESS POSITION
Counsel

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary 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)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary 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* _____
ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF LENDER _____
HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

INTEREST RATE _____ % None _____
TERM (Months/Years) _____
SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address _____
City _____
 Guarantor _____
 Other _____
(Describe)

Comments: _____