

060600029-NFH-0029

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
*A Public Document*

 Date Initial Filing Received  
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1440205

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Post, Lauren			

**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

Citizens General Obligation Bond Oversight Committee

Member

► 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☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)☐ Multi-County \_\_\_\_\_☒ County of San Francisco☒ City of San Francisco☐ Other \_\_\_\_\_**3. Type of Statement (Check at least one box)**☒ **Annual:** The period covered is January 1, 2021 through  
December 31, 2021.☐ **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one circle)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
December 31, 2021.☐ The period covered is January 1, 2021 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: 1**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)				

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 03/27/2022  
 (month, day, year)

 Signature Lauren Post  
 (File the originally signed paper statement with your filing official.)

 FPPC Form 700 - Cover Page (2021/2022)  
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