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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

E-Filed 09/28/2020

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Please type or print in ink.		193089868	
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
Van Degna, Anna			
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		
Rate Fairness Board	Member		
▶ 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 (Statewide Jurisdiction)	Judge, or Court Commissioner	
Multi-County			
X City of San Francisco			
3. Type of Statement (Check at least one box)			
X Annual: The period covered is January 1, 2019, through December 31, 2019	Leaving Office: Date Left (Checl	k one circle)	
The period covered is/, through December 31, 2019	<ul><li>The period covered is Ja of leaving office.</li></ul>	nuary 1, 2019, through the date	
X Assuming Office: Date assumed09102020	<ul><li>The period covered is</li><li>of leaving office.</li></ul>	_//, through the date	
☐ Candidate:Date of Election and office sou	ught, if different than Part 1:		
. Schedule Summary (must complete) ► Total numb	on of many including this community	2	
Schedules attached	per of pages including this cover page	9:	
	Calculate O. Jacobs Jacobs & Busines	DW	
☐ Schedule A-1 - Investments – schedule attached ☐ Schedule C - Income, Loans, & Business Positions – schedule attached ☐ Schedule D - Income – Gifts – schedule attached			
Schedule B - Real Property – schedule attached	☐ Schedule E - Income - Gifts - Travel I		
	Generale E - moonie - Onto - maver i	ayments – soriedule attached	
Or-			
None - No reportable interests on any schedule			
5. Verification	077	TID CODE	
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY STATE	ZIP CODE	
DAYTIME TELEPHONE NUMBER	San Francisco CA E-MAIL ADDRESS	94102	
( )	E-MAIL ADDRESS		
I have used all reasonable diligence in preparing this statement. I ha		knowledge the information contained	
herein and in any attached schedules is true and complete. I acknow	·	ct	
I certify under penalty of perjury under the laws of the State of	Camornia that the foregoing is true and corre	u.	
Date Signed 09/28/2020	Signature Anna Van Degna		
(month, day, year)	(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

Anna Van Degna

\* 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	Rate Fairness Board	Member	Annual 1/1/2019 - 12/31/2019
City and County of San Francisco	Controller's Office	Director of Public Finance	Annual 1/1/2019 - 12/31/2019
City & County of San Francisco	SMTA Bond Oversight Committe	Board Member	Annual 1/1/2019 - 12/31/2019
City & County of San Francisco	Redevelopment Successor Agency Oversight Board	Board Member	Assuming Office 9/10/2020