CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

A PUBLIC DOCUMENT

NAME OF FILER
(LAST) Lolas
(FIRST) George
(MIDDLE) 

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
STATE CONTROLLER'S OFFICE
Division, Board, Department, District, if applicable EXECUTIVE OFFICE
Your Position CHIEF OPERATING OFFICER

Agency: POOLED MONEY INVESTMENT AND STATE PUBLIC WORKS BOARDS Position: ALTERNATE CONTROLLER REPRESENTATIVE

2. Jurisdiction of Office (Check at least one box)
☐ State
☐ Multi-County
☐ City of

☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2018, through December 31, 2018.
☐ Leaving Office: Date Left __/__/______ (Check one circle.)
☐ The period covered is January 1, 2018, through the date of leaving office.
☐ The period covered is __/__/______, through the date of leaving office.
☐ Assuming Office: Date assumed __/__/______
☐ 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 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
300 CAPITOL MALL, STE. 1850 SACRAMENTO CA 95815
STREET
CITY STATE ZIP CODE

DAYTIME TELEPHONE NUMBER
EMAIL ADDRESS lolas@seo.ca.gov

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 3/25/19 (month, day, year) Signatur
SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

1. BUSINESS ENTITY OR TRUST:

Name: George Lolas

Address (Business Address Acceptable)

Check one
☐ Trust, go to 2
☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

INTERNET AUCTIONS

FAIR MARKET VALUE
☐ $0 - $1,099
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
☐ / / 18

ACQUIRED

DISPOSED

NATURE OF INVESTMENT
☐ Partnership
☐ Sole Proprietorship
☐ Other

YOUR BUSINESS POSITION: Owner

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST):

☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ Over $100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary):

☐ None
☐ Names listed below

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST:

Check one box:
☐ INVESTMENT
☐ REAL PROPERTY

Name of Business Entity, if investment, or Assessor’s Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
☐ / / 18

ACQUIRED

DISPOSED

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust
☐ Stock
☐ Partnership

☐ Leasehold
☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments: