STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Wong-Hernandez Jacqueline

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Controller
Division, Board, Department, District, if applicable
Your Position
Deputy State Controller

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: SEE ATTACHED LIST Position: ______________________

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

☐ State
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ Multi-County
(STATEWIDE JURISDICTION)
☐ City of ____________________________________________
☐ County of _________________________________________
☐ Other ______________________________________________

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

☐ Annual: The period covered is January 1, 2020, through
- OR -
The period covered is __________/________/________, through
□ Leaving Office: Date Left __________/________/________
(Check one circle.)
☐ The period covered is January 1, 2020, through the date of
leaving office.
- OR -
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: __2___

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
300 Capitol Mall Ste 300 Sacramento CA 95814-4338

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS

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 ___________________________ Signature ___________________________
(Month, day, year)
California State Controller Betty T. Yee – Boards and Commissions 2020

Commission on State Mandates (CSM) – Ex Officio Member
CA Debt & Investment Advisory Commission – Ex Officio Member
CA Educational Facilities Authority (CEFA) – Ex Officio Member
CA Health Facilities Financing Authority (CHFFA) – Ex Officio Member
CA Pollution Control Financing Authority (CPCFA) – Ex Officio Member
State Lands Commission – Ex Officio Member
State Public Works Board (PWB) – Ex Officio Member
CA Alternative Energy and Advanced Transportation Finance Authority – Ex Officio Member
CA Coastal Commission (even numbered years) – Ex Officio Member
CA Secure Choice Retirement Savings Board (added Oct. 2013) – Ex Officio Member
Ocean Protection Council (even numbered years) – Ex Officio Member