STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Sertich Anthony T

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
State Controller’s Office
Division, Board, Department, District, if applicable
Your Position
Deputy Controller
If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: See attached
Position: ____________________________

2. Jurisdiction of Office (Check at least one box)
☐ State
☐ Multi-County
☐ City of
☐ County of
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ (Statewide Jurisdiction)
☐ Other

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ The period covered is ________________ through December 31, 2020.
☐ Leaving Office: Date Left ________________
☐ (Check one circle.)
☐ The period covered is January 1, 2020, 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: ________
☐ 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
☐ Schedule F - None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
300 Capitol Mall, Suite 1850
Sacramento, CA 95814

STATE ZIP CODE

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 February 16, 2021
(month, day, year)

Signature ____________________________
(print the onlygually signed paper statement with your filing district.)
Form 700 – Filing for Multiple Positions

<table>
<thead>
<tr>
<th>Agency</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>California Debt Limit Allocation Committee</td>
<td>Board Member</td>
</tr>
<tr>
<td>California Tax Credit Allocation Committee</td>
<td>Board Member</td>
</tr>
</tbody>
</table>