STATEMENT OF ECONOMIC INTERESTS
A PUBLIC DOCUMENT

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
State Controller's Office
Division, Board, Department, District, if applicable
Deputy Controller, Legislative Affairs

Agency: _____________________________ Position: _____________________________

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

☐ State
☐ Multi-County __________________________
☐ City of _____________________________
☐ Other _____________________________
☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ County of ___________________________

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 ______/_____/______
☐ -or- The period covered is ______/_____/______, through December 31, 2018.
☐ The period covered is ______/_____/______, through the date of leaving office.
☐ Other _____________________________

☒ Assuming Office: Date assumed 11/18/2019
☐ 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 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 - Gifts, Travel Payments, and Other Transactions – schedule attached
☐ Schedule G - Business Interests and Business Interests of Spouse and Minor Children
☐ Schedule H - Outside Employment
☐ Schedule I - Consultants
☐ Schedule J - Grants
☐ Schedule K - Bonds
☐ Schedule L - Services to Proposed Candidates
☐ Schedule M - Expenses, Receipts, and Business Expenses
☐ Schedule N - Funds
☐ Schedule O - Gifts
☐ Schedule P - Travel
☐ Schedule Q - Employment
☐ Schedule R - Stock Ownership
☐ Schedule S - Other Financial Interests
☐ Schedule T - Employment
☐ Schedule U - Financial Interests
☐ Schedule V - Charitable Contributions
☐ Schedule W - Financial Interests
☐ Schedule X - Employment
☐ Schedule Y - Financial Interests
☐ Schedule Z - Employment
☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
300 Capitol Mall, Suite 1850 Sacramento CA 95814
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 12/3/19 Signature _____________________________
(month, day, year)
SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Sky West Airlines

ADDRESS (Business Address Acceptable)
444 South River Rd. St. George UT 84790

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
☐ $500 - $1,000
☐ $1,001 - $10,000
☒ $10,001 - $100,000
☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
☐ Salary
☒ Spouse’s or registered domestic partner’s income
(For self-employed use Schedule A-2.)
☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

☐ Sale of
(Real property, car, boat, etc.)
☐ Loan repayment
☐ Commission or ☐ Rental Income, list each source of $10,000 or more

☐ Other
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
☐ $500 - $1,000
☐ $1,001 - $10,000
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(For self-employed use Schedule A-2.)
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☐ Sale of
(Real property, car, boat, etc.)
☐ Loan repayment
☐ Commission or ☐ Rental Income, list each source of $10,000 or more

☐ Other
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender’s regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender’s regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

INTEREST RATE

TERMS (Months/Years)

☐ % ☐ None

SECURITY FOR LOAN
☐ None
☐ Personal residence

☐ Real Property
Street address

☐ Guarantor
City

☐ Other
(Describe)

Comments: