CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

Dat RECEIVED Received

AUG 1 0 2022

CITY CLERK

Please type or print in ink.

| BIER Many Lathenne 1. Office, Agency, or Court Agency, Name (Do not use acronyms) Airy of Pacifica Division, Board Department, District, if applicable Your Position | Frict 3 |
|--|---------------|
| Agency Name (Do not use acronyms) Aity of Pacifica Council Member Dis | frict |
| | |
| Agency: City of Pacifica Position: Council memory. Agency: Council memory. | SER |
| 2. Jurisdiction of Office (Check at least one box) | |
| State Judge, Retired Judge, Pro Tem Judge, or Court Common (Statewide Jurisdiction) | nissioner |
| Multi-County County of | |
| XCity of Pacifica Other | |
| 3. Type of Statement (Check at least one box) | |
| Annual: The period covered is January 1, 2021, through December 31, 2021. Leaving Office: Date Left// (Check one circle.) | |
| The period covered is/, through December 31, 2021. The period covered is January 1, 2021, through leaving office. | ne date of |
| Assuming Office: Date assumed/ The period covered is/ the date of leaving office. | _, through |
| Candidate: Date of Election 11/8/2 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 | e attached |
| Schedule A-2 - Investments – schedule attached Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached | ottoobod |
| Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached | ittached |
| -or- None - No reportable interests on any schedule | |
| 5. Verification | |
| MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) | |
| DAYTIME TELEPHONE NUMBER EMAIL ADDRESS | |
| (650)516-6034 many bier, com | |
| I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of the knowledge the informal herein and in any attached schedules is true and complete. I acknowledge this is a public document. | ion contained |
| I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct | |
| Date Signed OO ITO A Signature (File the originally signed paper statement with your filing official. | |