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STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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NAME OF FILER (LAST)	(FIRST)	(MIDDLE)			
Green, James Ronald							
1. Office, Agency, or Court							
Agency Name (Do not use acronyms)							
SAN LUIS OBISPO COUNTY							
Division, Board, Department, District, if a	pplicable	Your I	Position				
Cambria CSD		Util	lities Department Ma	nager			
▶ If filing for multiple positions, list below	v or on an attachment. (Do r	ot use acronyms)					
Agency: *SEE ATTACHED FOR ADD	ITIONAL POSITIONS	Positi	on:				
2. Jurisdiction of Office (Check a	t least one box)	11	as Datinal Index Des Tons	ludes as Court Commission of			
☐ State			 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) 				
Multi-County		X Cou	unty of <u>San Luis Obisp</u>	0			
City of		Oth	er				
3. Type of Statement (Check at lea	ast one box)						
X Annual: The period covered is Jar December 31, 2023.	nuary 1, 2023 through	☐ Lea	aving Office: Date Left (Che	ck one circle)			
-or- The period covered is December 31, 2023.			The period covered is Janu of leaving office.	ary 1, 2023 through the date			
Assuming Office: Date assumed			The period covered is of leaving office.	/, through the date			
Candidate:Date of Election	and office soug	ht, if different than Pa	art 1:				
4. Schedule Summary (required)	► Total num	per of pages inc	cluding this cover page	ge:2			
Schedules attached		pg	,	g			
Schedule A-1 - Investments - s	schedule attached	☐ Schedule	C - Income, Loans, & Busi	iness Positions – schedule attached			
Schedule A-2 - Investments – schedule attached			Schedule D - Income - Gifts - schedule attached				
Schedule B - Real Property – s	schedule attached	Schedule	E - Income - Gifts - Trave	el Payments - schedule attached			
-or-							
X None - No reportable interes	ts on any schedule						
5. Verification							
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pub.		TY	STATE	ZIP CODE			
DAYTHE TELEPHONE WHAPE	С	ambria	CA	93428			
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRE	55				
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				knowledge the information contained			
I certify under penalty of perjury under	r the laws of the State of C	alifornia that the fo	oregoing is true and corre	ct.			
Date Signed01/22/2024		Signature	ames Ronald Green				
(month, day, yea	r)	•	(File the originally signed paper	er statement with your filing official.)			

STATEMENT OF ECONOMIC INTERESTS COVER PAGE Expanded Statement Attachment

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

James Ronald Green

* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #			
SAN LUIS OBISPO COUNTY	Cambria CSD	Utilities Department Manager	Annual 1/1/2023 - 12/31/2023	121300047-NFH-0047			
County of San Luis Obispo	Cambria CSD	Water Systems Superintendent	Annual 1/1/2023 - 9/14/2023	121300047-NFH-0047			