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## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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NAME OF FILER	(LAST)		(FIRST)	(MIDDLE)			
Thomas, M	Michael						
1. Office,	Agency, or Court						
Agency N	ame (Do not use acronyms)						
San Lui	is Obispo County						
Division, E	Board, Department, District, if applicable		Your Position				
Cambria	a CSD		Board Member				
► If filing	for multiple positions, list below or on an attachme	nt. (Do not use acrony	ms)				
Agency: _	*SEE ATTACHED FOR ADDITIONAL POSITION	ONS	Position:				
2. Jurisdi	iction of Office (Check at least one box)						
☐ State			Judge, Retired Judge, Pro Te (Statewide Jurisdiction)	m Judge, or Court Commissioner			
Multi-0	County	<u>&gt;</u>	County of San Luis Obi	spo			
☐ City o	f	Σ	Other_Cambria Communit	ty Services District			
3. Type o	f Statement (Check at least one box)						
X Annu	Ial: The period covered is January 1, 2023 throu December 31, 2023.	ıgh	Leaving Office: Date Left _ (C	heck one circle)			
-(	The period covered is 12 / 09 / 2022, 1 December 31, 2023.	through	O The period covered is Ja of leaving office.	nuary 1, 2023 through the date			
Assu	ming Office: Date assumed/	_	<ul> <li>The period covered is</li> <li>of leaving office.</li> </ul>	/, through the date			
☐ Cand	lidate:Date of Election and of	ifice sought, if different t	han Part 1:				
4. Schedu	le Summary (required) ▶ Tot	al number of page	es including this cover p	nade. 3			
	iles attached	ar mannaor or page	o moluumy tine cover p	go:			
X S	Schedule A-1 - Investments – schedule attached	☐ Sc!	nedule C - Income, Loans, & B	usiness Positions – schedule attached			
	Schedule A-2 - Investments – schedule attached	☐ Sci	nedule D - Income - Gifts - sc	hedule attached			
	Schedule B - Real Property – schedule attached	☐ Scl	nedule E - Income - Gifts - Tra	avel Payments - schedule attached			
-or-							
☐ Non	e - No reportable interests on any sched	ule					
5. Verifica	tion						
MAILING AD (Business o	DDRESS STREET r Agency Address Recommended - Public Document)	CITY	STATE	ZIP CODE			
		Cambria	CA	93428			
DAYTIME T	ELEPHONE NUMBER	E-MAIL	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 u	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.						
Date Sign	ned 01/16/2024	Signatur	e Michael Thomas				
	(month, day, year)	3	(File the originally signed p	paper statement with your filing official.)			

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE Expanded Statement Attachment

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Michael Thomas

\* 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	Board Member	Annual 12/9/2022 - 12/31/2023	121300047-NFH-0047	
County of San Luis Obispo	Cambria CSD	Members of Resources and Infrastructure Committee	Annual 1/1/2022 - 12/31/2022	121300047-NFH-0047	
SAN LUIS OBISPO COUNTY	Cambria CSD	Members of Parks, Recreation & Open Space Committee	Annual 9/27/2023 - 12/31/2023	121300047-NFH-0047	

## SCHEDULE A-1

#### Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION						
Name						
Thomas, Michael						

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Necessity Retail (RTL) REIT	CION ARES Diversified Credit Fund (CADWX) CLASS L
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Property Management	Banking
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000   X \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	∑ \$100,001 - \$1,000,000 ☐ Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
NATURE OF INVESTMENT  X Stock Other	NATURE OF INVESTMENT  X Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
○ Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 23	/ / 23 / / 23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Blackstone REIT Common Stock, Class T	Cottonwood Communities Common Stock, Class T
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Property Management	Property Management
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000\$10,001 - \$100,000
X \$100,001 - \$1,000,000 Over \$1,000,000	X \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)
Thouse Necessed of \$500 of winte (Nepolt of Schedule of	Theorite Necessed of 4000 of World (Nepott of Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 23 , , , 23	/ /23 / /23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
RREEF Property Trust (REIT) Class A	CVX
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Property Management	Energy
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \textbf{X} \$10,001 - \$100,000
X   \$100,001 - \$1,000,000   Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	X Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
○ Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 23	/ /23 / /23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
'	11
Comments:	