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STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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NAME OF	FILER (LAST)		(FIRST)		(MIDDLE)								
Artho	, Antoni												
1. Offi	ffice, Agency, or Court												
Ager	ncy Name (Do not use acronyms)												
SAN	LUIS OBISPO COUNTY												
Divis	sion, Board, Department, District, if applicable		Your Position										
Cam	bria CSD		Wastewater	Systems Superi	ntendent								
► If	ng for multiple positions, list below or on an attachment. (Do not use acronyms)												
Ager	ncy:		Position:										
2. Jui	risdiction of Office (Check at least one l	box)		5 7									
	State		Judge, Retire (Statewide Ju	d Judge, Pro Tem Jud Irisdiction)	dge, or Court Commissioner								
	Multi-County			,									
	City ofCambria		Other										
3. Typ	oe of Statement (Check at least one box)												
	Annual: The period covered is January 1, 202. December 31, 2022.	2 through	Leaving Offi	ce: Date Left(Check	J one circle)								
	The period covered is	, through	O The perio of leaving		1, 2022 through the date								
X	Assuming Office: Date assumed 12 / 01	/2023	The periodof leaving		, through the date								
	Candidate:Date of Election	and office sought, if di	fferent than Part 1:										
		► Total number o	f pages including	this cover page	:1								
Sch	edules attached												
	☐ Schedule A-1 - Investments – schedule attached ☐ Schedule C - Income, Loans, & Business Positions – schedule attached												
	Schedule A-2 - Investments – schedule atta		Schedule D - Incom	me - Gifts - schedul	e attached								
	Schedule B - Real Property – schedule attac	ched	Schedule E - Incor	me – Gifts – Travel F	Payments – schedule attached								
-or-													
X	None - No reportable interests on any	schedule											
5. Ver	ification												
	ING ADDRESS STREET ness or Agency Address Recommended - Public Document)	CITY		STATE	ZIP CODE								
DAV	TIME TELEDIJONE NIJIMDED	Cambri		CA	93428								
DAY I	TIME TELEPHONE 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 cont 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	s	gnature Antoni A	rtho	demand of the same
									(month, day, year)		(File	the originally signed paper sta	atement with your filing official.)