



STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) Fritz, Denise

1. Office, Agency, or Court

Agency Name (Do not use acronyms) San Luis Obispo County
Division, Board, Department, District, if applicable Cambria CSD
Your Position Administration Department Manager

Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS Position:

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

[X] State [] Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
[] Multi-County [] County of
[X] City of Cambria [] Other

3. Type of Statement (Check at least one box)

[X] Annual: The period covered is January 1, 2024, through December 31, 2024.
-or- The period covered is through December 31, 2024.
[] Assuming Office: Date assumed
[] Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (required)

Total number of pages including this cover page: 2

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

-or- [X] None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
PO Box 65 1316 Tamsen Dr. Cambria CA 93428
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(805) 927-6118 dfritz@cambriacsd.org

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 02/11/2025 (month, day, year)

Signature Denise Fritz (File the originally signed paper statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
Expanded Statement Attachment

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Denise Fritz

* 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	Administration Department Manager	Annual 1/1/2024 - 12/31/2024	121300047-NFH-0047
San Luis Obispo County	Cambria CSD	Finance Manager	Annual 1/1/2024 - 12/31/2024	