



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

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS Position:

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

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

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

[X] Annual: The period covered is January 1, 2023 through December 31, 2023. -or- The period covered is 06 / 02 / 2023, through December 31, 2023. [ ] Assuming Office: Date assumed [ ] Candidate: Date of Election and office sought, if different than Part 1: [ ] Leaving Office: Date Left (Check one circle) The period covered is January 1, 2023 through the date of leaving office. The period covered is through the date of leaving office.

4. Schedule Summary (required)

Total number of pages including this cover page: 2

Schedules attached

- [ ] Schedule A-1 - Investments - schedule attached [ ] Schedule C - Income, Loans, & Business Positions - schedule attached [ ] Schedule A-2 - Investments - schedule attached [ ] Schedule D - Income - Gifts - schedule attached [ ] Schedule B - Real Property - 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 Cambria CA 93428 DAYTIME 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 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 01/22/2024 Signature Denise Fritz (month, day, year) (File the originally signed paper statement with your filing official.)

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
Expanded Statement Attachment**

<b>CALIFORNIA FORM 700</b>	
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 6/2/2023 - 12/31/2023	121300047-NFH-0047
San Luis Obispo County	Cambria CSD	Finance Manager	Annual 1/1/2023 - 6/2/2023	121300047-NFH-0047