

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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NAME OF FILER (LAS	Γ) (FIRST)		(MIDDLE)
So	Gary		
I. Office, Agen	· · · · · · · · · · · · · · · · · · ·		_
	Do not use acronyms)		
	unty Fire District		
	Department, District, if applicable		Your Position
Division, Board, 1	Separation, District, if applicable		Tour I ostion
			Director
► If filing for mu	Itiple positions, list below or on an attachment.	(Do not use	se acronyms)
Agonov:			Desition
Agency.			Position:
2. Jurisdiction	of Office (Check at least one box)		
State			Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
			(Statewide Jurisdiction)
Multi-County			▼ County of Sonoma
			Other
3. Type of Sta	tement (Check at least one box)		
7.	ne period covered is January 1, 2021, through		Leaving Office: Date Left/
	ecember 31, 2021 .		(Check one circle.)
	ne period covered is	, through	 The period covered is January 1, 2021, through the date of leaving office. -or-
Assuming (Office: Date assumed/		The period covered is/, through the date of leaving office.
Candidate:	Date of Election and	office sought,	t, if different than Part 1:
1 Schedule S	ummary (must complete) ► Tota	al numbor	r of pages including this cover page:
Schedules	• • • •	ii iiuiiibei	r of pages including this cover page:2
Schedule	• A-1 - Investments – schedule attached	Г	Schedule C - Income, Loans, & Business Positions – schedule attached
× Schedule	e 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- □ None	- No reportable interests on any sche	dule	
5. Verification			
MAILING ADDRESS (Business or Agency	STREET Address Recommended - Public Document)	CITY	STATE ZIP CODE
8200 Old Re		Winds	sor CA 95492
DAYTIME TELEPHO	NE NUMBER		EMAIL ADDRESS
(707)892	-2440		gary_so@hotmail.com
	easonable diligence in preparing this statement. y attached schedules is true and complete. I a		ewed this statement and to the best of my knowledge the information contained at this is a public document.
	penalty of perjury under the laws of the Stat	_	•
Date Signed	01/12/2022 11:26 PM	S	Signature Electronic Submission
	(month, day, year)		(File the originally signed paper statement with your filing official.)

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

(Ownership Interest is 10% or Greater)

Gary So

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
So Consulting	
Name 5195 Hall Rd., Santa Rosa, CA 95401	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS Training and Consultation	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Owner	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below
None or ⋈ Names listed below J Goetz Consulting	None or Names listed below
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property 5195 Hall Rd., Santa Rosa, CA 95401	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 NATURE OF INTEREST
▼ Property Ownership/Deed of Trust Stock Partnership Leasehold Other	Property Ownership/Deed of Trust Stock Partnership Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached

Comments: _