## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

(month, day, year)

## STATEMENT OF ECONOMIC INTERESTS



A PUBLIC DOCUMENT	COVER PAGE	
Please type or print in ink.		14 AUG -7 PM 3: 24
NAME OF FILER (LAST)  Christoph	(FIRST)	CHT SECOSTALMESA
1. Office, Agency, or Court		No.
Agency Name (Do not use acronyms)		
Division, Board, Department, District, if applicable	Your Position	
▶ If filing for multiple positions, list below or on an attachment. (Do not u	use acronyms)	TP-11 PRINTED TO STATE TO A STATE OF THE STA
Agency:	Position:	
2. Jurisdiction of Office (Check at least one box)		
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)	
Multi-County	County of	
Picity of Costa Meso	Other	
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2013, through December 31, 2013.	Leaving Office: Date Lo (Check one)	eft/
The period covered is/, through December 31, 2013.	<ul> <li>The period covered is leaving office.</li> </ul>	s January 1, 2013, through the date of
Assuming Office: Date assumed	O The period covered is the date of leaving of	s, through fice.
Candidate: Election year 2014 and office sought, i	f different than Part 1:	
4. Schedule Summary		
Check applicable schedules or "None." ► Tota	I number of pages including	g this cover page:
Schedule A-1 - Investments – schedule attached	activities of meaning a submittee of contention attacking	
<ul> <li>Schedule A-2 - Investments – schedule attached</li> <li>Schedule B - Real Property – schedule attached</li> </ul>	Schedule D - Income - Gifts -	
-or-		Travel Payments – schedule attached
None - No reportable inter	ests on any schedule	***************************************
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	STATI	21P CODE 92626
DAYTIME TELEPHONE NUMBER (714) 865 9746	E-MAIL ADDRESS (OPTIONAL)	12000
I have used all reasonable diligence in preparing this statement. I have reviewherein and in any attached schedules is true and complete. I acknowledge		of my knowledge the information contained
I certify under penalty of perjury under the laws of the State of Californ	nia that the foregoing is true and	correct.
Data Signed	Signature /	,

(File the originally signed statement with your filing official.)