

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

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HECENEU FAIR POLITICAL PRACTICES COMMISSION

Please type or print in ink.				FRACTIC	ES COMMIS
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)		
Bonneville	Maria		Elena	2023 APR	10 AMIO
1. Office, Agency, or Court					
Agency Name (Do not use acronyms	5)	-			
Division, Board, Department, District,	if applicable	Your	Position	-	
State Board		Vic	e Chairperson		
▶ If filing for multiple positions, list b	elow or on an attachment. (Do no	ot use acronyms)			
Agency:		Posi	ition:		
2. Jurisdiction of Office (Chec	ck at least one box)				
■ State			lge, Retired Judge, Pro Tem J atewide Jurisdiction)	udge, or Court Commi	ssioner
Multi-County		Co	unty of		
City of		Oth	ner		
3. Type of Statement (Check a					
Annual: The period covered is December 31, 2022.	·	☐ Le	eaving Office: Date Left(Check on		_
The period covered is December 31, 2022.	, throu	ugh -or	The period covered is Janua leaving office.	ry 1, 2022, through the	e date of
Assuming Office: Date assume	ed 01 , 28 , 2023		The period covered is the date of leaving office.	J	, through
Candidate: Date of Election _	and office so	ought, if different t	han Part 1:		
4. Schedule Summary (requi	schedule attachedschedule attached	Schedule Schedule	including this cover particles of the cover p	e attached	
	interests on any schedule			·	
5. Verification	interests on any sonoution				
MAILING ADDRESS STREET	CIT	Y	STATE	ZIP CODE	
(Business or Agency Address Recommended - 601 Gateway		outh San Fran	cisco CA	94080	
DAYTIME TELEPHONE NUMBER		EMAIL ADDRI			
()		mbonne	eville@cirm.ca.gov		
I have used all reasonable diligence in herein and in any attached schedule		reviewed this stat	ement and to the best of my ki	nowledge the informati	on contained
I certify under penalty of perjury u	under the laws of the State of Ca	alifornia that the	foregoing is true and correct	t. //	
Date Signed 03/21/2023		Signature	maria Bor	nnui/Le	
(month, da)	y, year)		(File the originally signed paper st	atement with your ning official.)	