

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Office: **RECEIVED**
OCT 14 2024

Please type or print in ink.

NAME OF FILER (LAST) SPAW (FIRST) VICTOR (MIDDLE) A **CITY CLERK**

1. Office, Agency, or Court

Agency Name (Do not use acronyms) CITY OF PACIFICA Candidate For City Council
Division, Board, Department, District, if applicable Your Position District One

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

Agency: _____ Position: _____

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

- State
- Multi-County _____
- City of Pacifica
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual:** The period covered is January 1, 2023, through December 31, 2023.
- Leaving Office:** Date Left _____ (Check one circle.)
- Assuming Office:** Date assumed _____
- The period covered is January 1, 2023, through the date of leaving office.
- Candidate:** Date of Election 11-5-24 and office sought, if different than Part 1: _____
- The period covered is _____, through the date of leaving office.

4. Schedule Summary (required)

► Total number of pages including this cover page: 1

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- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document) _____ PACIFICA CA 94044
DAYTIME TELEPHONE NUMBER _____ EMAIL 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 10-10-24 Signature _____
(month, day, year) (File the originally signed paper statement with your filing official.)