

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT**



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
ASH RON P

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

NORTH COAST COUNTY WATER DISTRICT

Division, Board, Department, District, if applicable

BOARD OF DIRECTORS

Your Position

BOARD MEMBER

► 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

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of **SAN MATEO**

City of **PACIFICA**

Other _____

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

Annual: The period covered is January 1, 2022, through December 31, 2022.

Leaving Office: Date Left _____ (Check one circle.)

-or- The period covered is _____, through December 31, 2022.

The period covered is January 1, 2022, through the date of leaving office.

Assuming Office: Date assumed _____

-or- The period covered is _____, through the date of leaving office.

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (required)

► Total number of pages including this cover page: _____

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- **None - No reportable interests on any schedule**

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

2400 FRANCISCO BLVD

PACIFICA

CA

94044

DAYTIME TELEPHONE NUMBER

EMAIL ADDRESS

(650) 355-3462

RASH@NCCWD.COM

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 **03/15/2023**
(month, day, year)

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