

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Initial Filing Received
Official Use Only

STATE TREASURER
STATE OF CALIFORNIA
2016 APR 30 PM 5:41
ADMINISTRATION

Please type or print in ink.

NAME OF FILER (LAST) (FIRST)
Grajski Rebecca J.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
State Treasurer's Office
Division, Board, Department, District, if applicable
Administration Division
Your Position
Director, Administration Division

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
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, 2015, through December 31, 2015.
-or-
The period covered is through December 31, 2015.
Assuming Office: Date assumed
Candidate: Election year and office sought, if different than Part 1:
Leaving Office: Date Left
Check one
The period covered is January 1, 2015, through the date of leaving office.
-or-
The period covered is through the date of leaving office.

4. Schedule Summary (must complete) Total number of pages including this cover page:

- 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
915 Capitol Mall, Room 538 Sacramento CA 95630
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
( 916 ) 653-7345 bgrajski@treasurer.ca.gov

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 03/30/2016
(month, day, year)

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