STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A Public Document

Please type or print in ink.

NAME OF FILER
(LAST) (FIRST) (MIDDLE)

Mock, Frank Edgar

1. Office, Agency, or Court

Agency Name: Mariposa County
Division, Board, Department, District, if applicable: Mariposa Public Utilities District
Your Position: Member/Director

Agency: 
Position:

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

☐ State
☐ Multi-County
☐ City of

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
☒ County of Mariposa
☐ Other (MPUD Boundaries)

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

☐ Annual: The period covered is January 1, 2021 through December 31, 2021.
☐ or-

The period covered is_____/_____/_____, through December 31, 2021.

☐ Assuming Office: Date assumed ______/_____/_____

☐ Leaving Office: Date Left ______/_____/_____

☐ The period covered is January 1, 2021 through the date of leaving office.

☐ The period covered is ______/_____/_____, through the date of leaving office.

☒ Candidate: Date of Election 1/1/2022 and office sought, if different than Part 1:

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
(Business or Agency Address Recommended - Public Document)
PO Box 49
Mariposa, CA 95338

STREET
CITY
STATE ZIP CODE

DAYTIME TELEPHONE NUMBER
( 209 ) 966-2515

E-MAIL ADDRESS
fmock@sbcglobal.net

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 07/23/2022
Signature Frank Edgar Mock

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

FPPC Form 700 - Cover Page (2021/2022)
1. Candidate Information:

Check One: 
- [X] Amended
- [] Initial

Name of Candidate: [Mariposa County Clerk]

3. Certification:

[ ] I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

[ ] On ___, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

[ ] I did not exceed the expenditure ceiling in the primary or special election held on ___.

[ ] I exceed the voluntary expenditure ceiling for the election stated above.

Signature: [Signature]

Date: [Date]

Exempted on [Exempted Date]

[Form Information]

Form 501

Filed

Mariposa County Clerk

[Signature]

[Date]

[iPhone Number]

[iEmail Address]
3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

[Signature]

[Date]

I have enclosed personal funds in excess of the expenditure ceiling for the election listed above.

[Signature]

[Date]

I do not exceed the expenditure ceiling for the general or special fund election.

I accept the voluntary expenditure ceiling for the election listed above.

[Signature]

[Date]

I do not accept the voluntary expenditure ceiling for the election listed above.

I accept the voluntary expenditure ceiling for the election listed above.

[Signature]

[Date]

2. State Candidate Expenditure Limit Statement:

[Field: Special/Runoff]

[Field: Party Preference]

[Field: District Number]

[Field: City]

[Field: State]

[Field: Zip Code]

[Field: Name of County-County Line]

[Field: Official Publication Date]

[Field: Office Unicaption]

[Field: Address]

[Field: City]

[Field: Zip Code]

[Field: Email (Optional)]

[Field: Telephone Number]

[Field: Fax Number (Optional)]

[Field: Date]

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