

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

Date Initial Filing Received
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Armstrong John F.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Groveland Community Services District, Board Member
Division, Board, Department, District, if applicable Your Position

► 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, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other Special District

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

- Annual:** The period covered is January 1, 2022, through December 31, 2022.
- or-
- The period covered is ____/____/____, through December 31, 2022.
- Assuming Office:** Date assumed 12 / 13 / 2022
- Leaving Office:** Date Left ____/____/____ (Check one circle.)
- The period covered is January 1, 2022, through the date of leaving office.
- 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 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

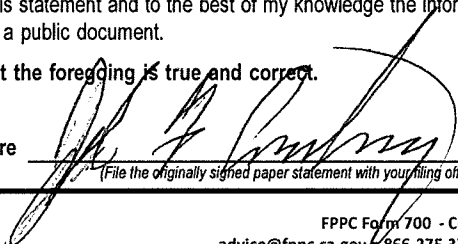
5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
P.O. Box 350 Groveland CA 95321
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(209) 962-7161 jarmstrong@gcsd.org

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 3/14/2023
(month, day, year)

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