



## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received

. . Office

Please type or	print in ink.				City & Laguna beach, C	
NAME OF FILER (LAST)		(FIRST)		(MIDDLE)		
Gufarotti		Adam		George		
1. Office, A	gency, or Court					
Agency Nar	Agency Name (Do not use acronyms)					
City of Laguna Beach						
Division, Bo	ard, Department, District, if application	able	Your Pos	sition		
			Senio	r Public Works Analys	st .	
► If filing fo	or multiple positions, list below or	iple positions, list below or on an attachment. (Do not use acronyms)				
Agency:			Position	i		
2. Jurisdiction of Office (Check at least one box)						
☐ State				Retired Judge, Pro Tem Judide Jurisdiction)	ge, or Court Commissioner	
☐ Multi-Co	unty		County	of		
City of	Laguna Beach					
0 T (	01.1					
3. Type of Statement (Check at least one box)						
Annua -or	: The period covered is January December 31, <b>2020</b> .	1, <b>2020,</b> through	Leavi	ng Office: Date Left (Check one		
-01	The period covered is/_ December 31, <b>2020</b> .	, throu	gn	ne period covered is January aving office.	1, <b>2020</b> , through the date of	
Assum	ing Office: Date assumed			ne period covered is/. e date of leaving office.	, through	
☐ Candid	Candidate: Date of Election and office sought, if different than Part 1:					
4. Schedule Summary (must complete) ► Total number of pages including this cover page:						
Schedules attached						
☐ Sch	Schedule A-1 - Investments – schedule attached					
☐ Sch	☐ Schedule A-2 - Investments – schedule attached ☐ Schedule D - Income – Gifts – schedule attached					
☐ Sch	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 ADD		CIT	Y	STATE	ZIP CODE	
(Business or A	gency Address Recommended - Public Do	cument)			92651	
	est Avenue	La	guna Beach	CA	92001	
	DAYTIME TELEPHONE NUMBER  (949 ) 497-0304  I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contain 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.					
` '						
herein and						
I certify un						
Date Signe	3/31/202	l	Signature	Mossifore	M	
0.5110	(month, day, year)	_		(File the originally signed paper state	ment with your filing official.)	