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CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Walker	Yvonne		
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
California Public Employees F	Retirement System		
Division, Board, Department, District, if	applicable	Your Position	
		Special Retired Member	
▶ If filing for multiple positions, list bel	ow 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)	caage, or court commensure.
Multi-County		County of	
City of			
3. Type of Statement (Check at)			
Annual: The period covered is January December 31, 2021.	anuary 1, 2021, through	Leaving Office: Date Left (Check of	one circle.)
-or-	, throug	•	uary 1, 2021, through the date of
December 31, 2021 .	, unoug	leaving office.	, , , ====, , , , , , , , , , , , , , ,
■ Assuming Office: Date assumed	12 , 21 , 2022	••	/, through
Candidate: Date of Election	and office sou	ght, if different than Part 1:	
4. Schedule Summary (must o	complete) > Total numb	per of pages including this cover p	page: 0
Schedules attached	. ,	, , , , , , , , , , , , , , , , , , , ,	
Schedule A-1 - Investments -	schadula attachad	Schedule C - Income, Loans, & Busine	ess Positions – schedule attached
Schedule A-1 - Investments – schedule attached Schedule C - Income, Loans, & Business Positions – schedule D - Income – Gifts – schedule attached			
Schedule B - Real Property –		Schedule E - Income - Gifts - Travel	Payments - schedule attached
-or- None - No reportable in	iterests on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - P	CITY ublic Document)	STATE	ZIP CODE
c/o Keys Law Corp, 428 J St	·	ramento CA	95814
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(916) 890-3670		walker@keyslawcorp.com	
I have used all reasonable diligence in herein and in any attached schedules		eviewed this statement and to the best of my dge this is a public document.	knowledge the information contained
I certify under penalty of perjury un	der the laws of the State of Cali	fornia that the foregoing is true and corre	ect.
Date Signed 18 SAN 2	3	Signature x US W W	DO(E.R.
(month, day, y	ear)		statement with your filing official.)