

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
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Filed Date: 03/07/2025 01:20 PM
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Ruffino Frank P

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Board for Professional Engineers Land Surveyors and Geologists

Division, Board, Department, District, if applicable

Your Position

Board Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: SEE ATTACHED LIST

Position:

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

☒ State

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

☐ Multi-County

☐ County of

☐ City of

☐ Other

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

☒ **Annual:** The period covered is January 1, 2024, through
December 31, 2024.

☐ **Leaving Office:** Date Left ____/____/_____
(Check one circle below.)

-or-

The period covered is ____/____/_____, through
December 31, 2024.

☐ The period covered is January 1, 2024, through the date of
leaving office.

-or-

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

☐ **Assuming Office:** Date assumed ____/____/____

☐ **Candidate:** Date of Election ____ and office sought, if different than Part 1: ____

4. Schedule Summary (required)

► Total number of pages including this cover page: 5

Schedules attached

☐ **Schedule A-1 - Investments** – schedule attached

☐ **Schedule C - Income, Loans, & Business Positions** – schedule attached

☐ **Schedule A-2 - Investments** – schedule attached

☒ **Schedule D - Income – Gifts** – schedule attached

☒ **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 ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

901 P Street, Suite #411-B

Sacramento

CA

95814-4801

DAYTIME TELEPHONE NUMBER

(916) 653-2995

EMAIL ADDRESS

frank.ruffino@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 03/07/2025 01:20 PM
(month, day, year)

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

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE ATTACHMENT

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES COMMISSION	
Name	
Frank Ruffino	

EXPANDED STATEMENT LIST

Agency Name	Division, Board, Department, District	Position or Title	Jurisdiction	Type of Statement	Period Covered
Treasurer's Office		Pension & Benefits Officer	State California	Annual	01/01/24 - 12/31/24
Public Employees Retirement System		Designee	State California	Annual	01/01/24 - 12/31/24
Teachers' Retirement System		Designee	State California	Annual	01/01/24 - 12/31/24

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

Frank Ruffino

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

595-203-12-00

CITY

Chula Vista, CA

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/24 ACQUIRED ____/____/24 DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

SEE ATTACHED

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/24 ACQUIRED ____/____/24 DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None _____

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None _____

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

SCHEDULE B

Attachment

CALIFORNIA FORM		700
FAIR POLITICAL PRACTICES COMMISSION		
Name		
Frank Ruffino		

ASSESSOR PARCEL NUMBER OR STREET ADDRESS : 595-203-12-00

LIST OF SOURCES OF RENTAL INCOME OF \$10,000 OR MORE
Tenant is a Peace Officer. Tenant name to be disclosed confidentially to FPPC (Waiting approval/authorization from FPPC)

SCHEDULE D

Income – Gifts

<div> <div>NAME OF SOURCE (Not an Acronym)</div> <div>Virtus Investment Partners</div> <div>ADDRESS (Business Address Acceptable)</div> <div>One Financial Plaza, Hartford, CT 06103</div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <div>Capital Management</div> </div> <table> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> <tr> <td>01 / 24 / 24</td> <td>\$ 88.00</td> <td>Food/Beverage</td> </tr> <tr> <td>/ /</td> <td>\$</td> <td></td> </tr> <tr> <td>/ /</td> <td>\$</td> <td></td> </tr> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	01 / 24 / 24	\$ 88.00	Food/Beverage	/ /	\$		/ /	\$		<div> <div>NAME OF SOURCE (Not an Acronym)</div> <div>William Blair & Company</div> <div>ADDRESS (Business Address Acceptable)</div> <div>150 North Riverside Plaza, Chicago, IL 60606</div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <div>Assets Management</div> </div> <table> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> <tr> <td>08 / 05 / 24</td> <td>\$ 50.00</td> <td>Food</td> </tr> <tr> <td>/ /</td> <td>\$</td> <td></td> </tr> <tr> <td>/ /</td> <td>\$</td> <td></td> </tr> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	08 / 05 / 24	\$ 50.00	Food	/ /	\$		/ /	\$	
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