

STATEMENT OF ECONOMIC INTERESTS

 Date Initial Filing Received
 Filing Official Use Only

COVER PAGE

1376169

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
SCHMIDT, BRIAN			

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

San Mateo County

Division, Board, Department, District, if applicable

Mid Peninsula Water District

Your Position

Director

▶ 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)

- | | |
|---|--|
| <input type="checkbox"/> State | <input type="checkbox"/> Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) |
| <input type="checkbox"/> Multi-County _____ | <input checked="" type="checkbox"/> County of <u>San Mateo</u> |
| <input type="checkbox"/> City of _____ | <input type="checkbox"/> Other _____ |

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Annual: The period covered is January 1, 2020 through December 31, 2020 | <input type="checkbox"/> Leaving Office: Date Left ____/____/____
(Check one circle) |
| -or- | <input type="checkbox"/> The period covered is January 1, 2020 through the date of leaving office. |
| The period covered is ____/____/____, through December 31, 2020 | <input type="checkbox"/> The period covered is ____/____/____, through the date of leaving office. |
| <input type="checkbox"/> Assuming Office: Date assumed ____/____/____ | |
| <input type="checkbox"/> 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: 3
Schedules attached

- | | |
|---|---|
| <input checked="" type="checkbox"/> Schedule A-1 - Investments – schedule attached | <input checked="" type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached |
| <input type="checkbox"/> Schedule A-2 - Investments – schedule attached | <input type="checkbox"/> Schedule D - Income – Gifts – schedule attached |
| <input type="checkbox"/> Schedule B - Real Property – schedule attached | <input type="checkbox"/> 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
<i>(Business or Agency Address Recommended - Public Document)</i>				
3 Dairy Lane		Belmont	CA	94002
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS		
(650) 591-8941		bschmidt@midpeninsulawater.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 03/31/2021
 (month, day, year)

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

SCHEDULE A-1 Investments

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name _____

SCHMIDT, BRIAN

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

<p>▶ NAME OF BUSINESS ENTITY Johnson & Johnson</p> <p>GENERAL DESCRIPTION OF THIS BUSINESS Diversified pharmaceutical</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ <small>(Describe)</small> <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More <i>(Report on Schedule C)</i></p> <p>IF APPLICABLE, LIST DATE: ____/____/20 ____/____/20 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF THIS BUSINESS</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ <small>(Describe)</small> <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More <i>(Report on Schedule C)</i></p> <p>IF APPLICABLE, LIST DATE: ____/____/20 ____/____/20 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF THIS BUSINESS</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ <small>(Describe)</small> <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More <i>(Report on Schedule C)</i></p> <p>IF APPLICABLE, LIST DATE: ____/____/20 ____/____/20 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF THIS BUSINESS</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ <small>(Describe)</small> <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More <i>(Report on Schedule C)</i></p> <p>IF APPLICABLE, LIST DATE: ____/____/20 ____/____/20 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF THIS BUSINESS</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ <small>(Describe)</small> <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More <i>(Report on Schedule C)</i></p> <p>IF APPLICABLE, LIST DATE: ____/____/20 ____/____/20 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF THIS BUSINESS</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ <small>(Describe)</small> <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More <i>(Report on Schedule C)</i></p> <p>IF APPLICABLE, LIST DATE: ____/____/20 ____/____/20 ACQUIRED DISPOSED</p>

Comments: _____

