

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

Date Initial Filing Received

3/25/2022 - 2:52 P.M. -er

Ple	ease type or print in ink.						
	ME OF FILER (LAST)	(FIRST)			(MIDDLE)		
Va	alenzuela	Gabriel			R		
1. Office, Agency, or Court							
	Agency Name (Do not use acronyms)						
Oakland Unified School District							
	Division, Board, Department, District, if applicable			Your Position			
	Office of the Ombudsp	person		Ombuds	sperson		
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)							
					Position:		
	Agency:			FOSILION			
2.	Jurisdiction of Office	sdiction 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 Oakland			Other _			
3	Type of Statement (Check at least one box)					
Annual: The period covered is January 1, 2021, through				Leaving	Office: Date Left	J	
	December 31, 2021. (Check one circle.)						
	The period cov December 31,	vered is/	, through	-or-	ng office.	1, 2021, through the date of	
	Assuming Office: Date assumed/				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 (must complete) ▶ Total number of pages including this cover page:						
Schedules attached Schedule A-1 - Investments – schedule attached Schedule C - Income, Loans, & Business Positions – schedule							
						Positions - schedule attached	
Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts -				come - Gifts - schedule a	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				CTATE	7ID CODE	
	MAILING ADDRESS (Business or Agency Address Recon	STREET nmended - Public Document)	CITY		STATE	ZIP CODE	
	1000 Broadway, Suite	e 150	Oaklan		CA	94806	
	DAYTIME TELEPHONE NUMBER			EMAIL ADDRESS	augla@guad ara		
(510) 879-3667 gabriel.valenzuela@ousd.org						autoday the information contained	
	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contains 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.						
	a and R. Valennile						
	Date Signed	3/11/22	Si	gnature	(Cho the originally size	amont with your films official l	
	1	(month, day, year)			(File the originally signed paper state	ment with your builty officially	