

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
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PROPOSITION B UNIT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Gascon George

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
County of Los Angeles
Division, Board, Department, District, if applicable
Your Position
District Attorney

► 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)

- State
- Multi-County _____
- City of _____
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of Los Angeles
- Other _____

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

- Annual: The period covered is January 1, 2022, through December 31, 2022.
- or- The period covered is _____ through December 31, 2022.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one circle.)
- The period covered is January 1, 2022, through the date of leaving office.
- or- The period covered is _____ through the date of leaving office.
- Candidate: Date of Election 03/05/2024 and office sought, if different than Part 1: _____

4. Schedule Summary (required)

► Total number of pages including this cover page: 2

Schedules attached

- Schedule A-1 - Investments - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule D - Income - Gifts - 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)
Los Angeles California 90012

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(213) 974-3512 ggascn@da.lacounty.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 11/21/2023 Signature _____
(month, day, year)

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
George Gascon

▶ 1. BUSINESS ENTITY OR TRUST

Name Tuiris Inc.

Address (Business Address Acceptable) Long Beach, CA 90802

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Digital Media Marketing

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$0 - \$1,999 _____/_____/22 _____/_____/22

\$2,000 - \$10,000 _____/_____/22 _____/_____/22

\$10,001 - \$100,000 _____/_____/22 _____/_____/22

\$100,001 - \$1,000,000 _____/_____/22 _____/_____/22

Over \$1,000,000 _____/_____/22 _____/_____/22

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____ Other

YOUR BUSINESS POSITION Spouse's Company

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000

\$500 - \$1,000 OVER \$100,000

\$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property _____

Description of Business Activity or City or Other Precise Location of Real Property _____

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 _____/_____/22 _____/_____/22

\$10,001 - \$100,000 _____/_____/22 _____/_____/22

\$100,001 - \$1,000,000 _____/_____/22 _____/_____/22

Over \$1,000,000 _____/_____/22 _____/_____/22

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Name _____

Address (Business Address Acceptable) _____

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$0 - \$1,999 _____/_____/22 _____/_____/22

\$2,000 - \$10,000 _____/_____/22 _____/_____/22

\$10,001 - \$100,000 _____/_____/22 _____/_____/22

\$100,001 - \$1,000,000 _____/_____/22 _____/_____/22

Over \$1,000,000 _____/_____/22 _____/_____/22

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____ Other

YOUR BUSINESS POSITION _____

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

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\$500 - \$1,000 OVER \$100,000

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\$10,001 - \$100,000 _____/_____/22 _____/_____/22

\$100,001 - \$1,000,000 _____/_____/22 _____/_____/22

Over \$1,000,000 _____/_____/22 _____/_____/22

NATURE OF INTEREST
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Comments: _____