

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
*A PUBLIC DOCUMENT*

Filed Date: 02/26/2025 04:18 PM  
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Lu-Yang Szu-Pei

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)  
Assessment Appeals Board  
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 Los Angeles  
 City of \_\_\_\_\_  Other \_\_\_\_\_

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

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

**4. Schedule Summary (required)**

► Total number of pages including this cover page: 2

**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)  
500 West Temple Street, Room B-4 Los Angeles CA 90012  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 213 ) 893-2523 ucszu@yahoo.com

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 02/26/2025 04:18 PM Signature Szu-Pei Lu-Yang  
(month, day, year) (File the originally signed paper statement with your filing official.)

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COVER PAGE ATTACHMENT

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>Szu-Pei Lu-Yang</u>

EXPANDED STATEMENT LIST

Agency Name	Division, Board, Department, District	Position or Title	Jurisdiction	Type of Statement	Period Covered
Rowland Water District		Member of the Board of Directors	Other District	Annual	01/01/24 - 12/31/24