NAME OF FILER

Aldred

Debra

Dianne

1. Office, Agency, or Court

Agency Name

Chico Unified School District

Division, Board, Department, District, if applicable

Your Position

Elementary School Administrator

► if filing for multiple positions, list below or on an attachment.

Agency: __________________________

Position: __________________________

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

☐ State

☐ Multi-County __________________________

☐ City of __________________________

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ County of __________________________

☐ Other Public School District

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


- or -

☐ The period covered is ___________ / ___________ , through December 31, 2012.

☐ Assuming Office: Date assumed ___________ / ___________, through December 31, 2012.

☐ Candidate: Election year ___________ and office sought, if different than Part 1: __________________________

☐ Leaving Office: Date Left ___________ / ___________ (Check one)

- or -

☐ The period covered is January 1, 2012, through the date of leaving office.

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

4. Schedule Summary

Check applicable schedules or "None."

☐ 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

Total number of pages including this cover page: 2

Verification

Name: __________________________

E. 7th Street

City: Chico

State: CA

ZIP Code: 95928

Street Address (Public Document)

Phone Number: 91-3117

E-mail Address (Optional): dal dred@chicousd.org

I, Debra D. Aldred, declare under the laws of the State of California that the foregoing is true and correct.

Signature: __________________________

(To be signed in ink)

Date: ___________ / ___________ / ___________

[Signature]

[Signature]

[Signature]

FPPC Form 700 (2012/2013)

FPPC Advice Email: advice@fppc.ca.gov

FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
**SCHEDULE B**  
Interests in Real Property  
(Including Rental Income)

### ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

2375 Notre Dame #1

**CITY**
Chico, CA 95926

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td>/ / 12</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>/ / 12</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td>ACQUIRED</td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td>DISPOSED</td>
</tr>
</tbody>
</table>

**NATURE OF INTEREST**
- Ownership/Deed of Trust
- Leasehold
- Easement
- 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

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* You are not required to report loans from commercial lending institutions 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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
</tr>
</tbody>
</table>

**INTEREST RATE**

%  None

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000
- Guarantor, if applicable

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**NAME OF LENDER**

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**

%  None

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000
- Guarantor, if applicable

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**Comments:**