CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Please type or print in ink.

NAI	ME OF FILER	(LAST)		(FIRST)		(MIDDLE)	
В	esnard		Bruce		R		
1.	Office, Agency, or Court						
	Agency Name						
	Chico Unified						
	Division, Board, Department, District, if applicable			Your Position			
			Principal				
	If CE LE YE _ E LE			, <u>, , , , , , , , , , , , , , , , , , </u>			
	▶ If filing for multiple positions, list b	elow or on an attach	ment				
	Agency:			Position:			
2.	Jurisdiction of Office (Check at least one box)						
	☐ State			Judge or Court Commissioner (Statewide Jurisdiction)			
	Multi-County			County of			
	☐ City of			Other Public Sch			
	Oity or			y ond			
3.	Type of Statement (Check at	least one box)					
	✓ Annual: The period covered is	January 1, 2012, thro	ough	Leaving Office: Da	te Left	<i></i>	
	December 31, 2012.			(Check one)			
	The period covered is . December 31, 2012.		, through	 The period cove leaving office. 	red is January	1, 2012, through the date of	
	Assuming Office: Date assume	ed	<u>-</u>	 The period cove the date of leavi 		, through	
Candidate: Election year and office sought, if different than Part 1:							
4.	Schedule Summary		•				
	Check applicable schedules or "None." Total number of pages including this					cover page:	
	☐ Schedule A-1 - Investments – schedule attached ☐ Schedule A-2 - Investments – schedule attached		☐ Schedule C - Income, Loans, & Business Positions – 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	D (5. D)	CITY		STATE	ZIP CODE	
	(Business or Agency Address Recommended - 169 Leora Ct	Public Document)	Chico	C	:A	95973	
	DAYTIME TELEPHONE NUMBER			E-MAIL ADDRESS (OPTIONAL)	·^	30310	
	(530) 891-3141			, ,			
	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information container 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	year!	Sig	gnature	ally signed etatores	nt with your filing official.)	
	• (m o no, uay,	year)		(File the origin	any signeo stateme	nt wiin your iiijng palcial.)	