CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Please type or print in ink.

NAME OF FILER		(LAST)		(FIRST)		(MIDDLE)	
Lin	dstrom		Scott		(Curtis	
1. (Office, Ag	jency, or Court					
7	Agency Name						
	Chico Unified School District						
ļ	Division, Boa	rd, Department, District, if applicable	Your Position				
	w			Student Support Coordinator			
	▶ If filing for multiple positions, list below or on an attachment.						
	Agency:		17.4	Position:	· · ·		
2.	Jurisdiction of Office (Check at least one box)						
[☐ State			☐ Judge or Court Co	☐ Judge or Court Commissioner (Statewide Jurisdiction)		
[Multi-County			County of			
_	_	•			Public School District		
				Carlor			
3.	Type of Statement (Check at least one box)						
[The period covered is January 1, 2012, the December 31, 2012.	rough	Leaving Office: (Check one)	Date Left		
	-or-	The period covered is/	, through	 The period cor leaving office. 	vered is Janua	ry 1, 2012, through the date of	
	Assumin	ng Office: Date assumed/		 The period contains the date of learning 		, through	
	Candidate: Election year and office sought, if different than Part 1:						
4. :	Schedule Summary						
(theck applicable schedules or "None." ► Total number of pages including this cover page:						
	Schedule A-1 - Investments – schedule attached Schedule C - Income, Loans, & Business Positions – schedule					ess Positions - schedule attached	
	☐ Scheduk	Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached					
	Schedule	Schedule B - Real Property – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached					
	-or-						
✓ None - No reportable interests on any schedule							
5. V	erificatio/	n					
	MAILING ADDRE	SS STREET ency Address Recommended - Public Document)	CITY		STATE	ZIP CODE	
•	1163 E 7	·	Chico		CA	95928	
ī	DAYTIME TELEF	PHONE NUMBER		E-MAIL ADDRESS (OPTIONAL)			
(•	391-3000					
l h	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.						
I							
Date Signed 02/14/2013 Signature							
D	ate Signed .	(month, day, year)	. Si	gnature (File the or	ginally signed statem	ent with your filing official.)	
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