NAME OF FILER
Rees

(NAME OF FILER)
(MIDDLE)
Marilyn
Rose

1. Office, Agency, or Court

Agency Name
Neal Dow Elementary School

Division, Board, Department, District, if applicable
Chico Unified School District

Your Position
Principal

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 Chico __________________________________________________________________
☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ County of Butte __________________________________________________________________
☐ Other Chico Unified School District __________________________________________________________________

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

☐ Leaving Office: Date Left ____________________________
☐ The period covered is ____________________________ through December 31, 2012.
☐ Assumed Office: Date assumed ____________________________
☐ The period covered is ____________________________ through leaving office.

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

4. Schedule Summary

☐ Schedule A-1 - Investments - schedule attached
☐ Schedule A-Z - 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

☐ None - No reportable interests on any schedule

Total number of pages including this cover page: 1

5. Verification

MAILING ADDRESS
1420 Neal Dow Avenue, Chico, CA 95926

STREET
DAYTIME TELEPHONE NUMBER
( 530 ) 891-3110

CITY
E-MAIL ADDRESS (OPTIONAL)
mrees@chicousd.org

STATE
ZIP CODE

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 02/14/2013
Signature

( month, day, year)

FPPC Form 700 (2012/2013)
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov