STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER

Cavanaugh

(LAST) Connie (MIDDLE)

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Chico Unified School District

Division, Board, Department, District, if applicable

Director, Fiscal Services

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

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 School District

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

☑ Annual: The period covered is January 1, 2013, through December 31, 2013.

☐ Leaving Office: Date Left ______/______/_______ (Check one)

☐ The period covered is January 1, 2013, through the date of leaving office.

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

☐ Assuming Office: Date assumed ______/______/_______

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

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

5. Verification

MAILING ADDRESS

STREET

City CA ZIP CODE

Chico 95928

DAILY TELEPHONE NUMBER

E-MAIL ADDRESS (OPTIONAL)

(530) 891-3000 ccavanaugh@chicousd.org

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 02/07/2014

(month, day, year)

Signature

(File the originally signed statement with your local office.)