CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received Official Use Only

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NAME OF FILER	(LAST)		(FIRST)		(MIDDLE)	
Carver	John			Wayne		
1. Office, Agency, or Cour	t					
Agency Name (Do not use acro	nyms)					
Chico Unified School District			Director M/O/T			
Division, Board, Department, District, if applicable		Your Position				
➤ If filing for multiple positions,	list below or on an attachme	ent. (Do not use	e acronyms)			
Agency:	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 (Che	ok at least one boy)					
Annual: The period covere December 31, 201	d is January 1, 2014, throug	h	Leaving (
-or- The period covere December 31, 201	d is/	, through		eriod covered is Janua g office.	ary 1, 2014, through the date of	
Assuming Office: Date assumed/			The period covered is/, through the date of leaving office.			
Candidate: Election year _	and o	office sought, if	different than Part 1	-		
4. Schedule Summary					. 1	
Check applicable schedu	les or "None."	➤ Total	number of pag	es including this	cover page:/	
Schedule A-1 - Investments	- schedule attached		Schedule C - In	ncome, Loans, & Busi	ness Positions – schedule attached	
Schedule A-2 - Investments	Schedule A-2 - Investments – schedule attached		Schedule D - Income - Gifts - schedule attached			
Schedule B - Real Property	- schedule attached	[Schedule E - In	icome – Gifts – Trave	Payments - schedule attached	
-or- ✓ None - No reportable interests on any schedule						
5. Verification			•			
MAILING ADDRESS STRE		CITY		STATE	ZIP CODE	
(Business or Agency Address Recommen 2455 Carmichael Dr.	,	Chico		CA	95928	
DAYTIME TELEPHONE NUMBER			E-MAIL ADDRESS			
(530) 624-7411		jcarver@chicousd.org				
I have used all reasonable diliger herein and in any attached sched					nowledge the information contained	
I certify under penalty of perjury under the laws of the State of California that the foregoing is frue and correct.						
Date Signed 03/18/2015		Si	gnature	Ku Way	n la -	
(mont	h, day, year)		/ //	(File the originally signed state	ment with your filing official.)	