

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
DeBock Laurie E

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)

Chico Unified School District

Division, Board, Department, District, if applicable

Bidwell Jr. High School

Your Position

Assistant Principal

▶ 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
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other Public School District

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

- Annual:** The period covered is January 1, 2014, through December 31, 2014.
- or-
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2014.
- Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- Candidate:** Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_
- Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- The period covered is January 1, 2014, through the date of leaving office.
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

**4. Schedule Summary**

Check applicable schedules or "None."

▶ Total number of pages including this cover page: 3

- 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 STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
2376 North Ave. Chico CA 95926

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
( 530 ) 891-3080 ldebock@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 03/06/2015  
(month, day, year)

Signature *Laurie DeBock*  
(File the originally signed statement with your filing official.)



**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
<p>NAME OF SOURCE OF INCOME  <u>Enloe Medical Center</u></p> <p>ADDRESS (Business Address Acceptable)  <u>1531 Esplanade</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE  <u>Hospital</u></p> <p>YOUR BUSINESS POSITION  <u>Registered Nurse</u></p> <p>GROSS INCOME RECEIVED  <input type="checkbox"/> \$500 - \$1,000    <input type="checkbox"/> \$1,001 - \$10,000  <input type="checkbox"/> \$10,001 - \$100,000    <input checked="" type="checkbox"/> OVER \$100,000</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED  <input checked="" type="checkbox"/> Salary    <input type="checkbox"/> Spouse's or registered domestic partner's income  <small>(For self-employed use Schedule A-2.)</small></p> <p><input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)</p> <p><input type="checkbox"/> Sale of _____  <small>(Real property, car, boat, etc.)</small></p> <p><input type="checkbox"/> Loan repayment</p> <p><input type="checkbox"/> Commission or    <input type="checkbox"/> Rental Income, list each source of \$10,000 or more  <small>(Describe)</small></p> <p><input type="checkbox"/> Other _____  <small>(Describe)</small></p>	<p>NAME OF SOURCE OF INCOME            _____</p> <p>ADDRESS (Business Address Acceptable)            _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE            _____</p> <p>YOUR BUSINESS POSITION            _____</p> <p>GROSS INCOME RECEIVED  <input type="checkbox"/> \$500 - \$1,000    <input type="checkbox"/> \$1,001 - \$10,000  <input type="checkbox"/> \$10,001 - \$100,000    <input type="checkbox"/> OVER \$100,000</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED  <input type="checkbox"/> Salary    <input type="checkbox"/> Spouse's or registered domestic partner's income  <small>(For self-employed use Schedule A-2.)</small></p> <p><input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)</p> <p><input type="checkbox"/> Sale of _____  <small>(Real property, car, boat, etc.)</small></p> <p><input type="checkbox"/> Loan repayment</p> <p><input type="checkbox"/> Commission or    <input type="checkbox"/> Rental Income, list each source of \$10,000 or more  <small>(Describe)</small></p> <p><input type="checkbox"/> Other _____  <small>(Describe)</small></p>

**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

<p>NAME OF LENDER* _____</p> <p>ADDRESS (Business Address Acceptable) _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF LENDER _____</p> <p>HIGHEST BALANCE DURING REPORTING PERIOD  <input type="checkbox"/> \$500 - \$1,000  <input type="checkbox"/> \$1,001 - \$10,000  <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> OVER \$100,000</p>	<p>INTEREST RATE _____%    <input type="checkbox"/> None</p> <p>TERM (Months/Years) _____</p> <p>SECURITY FOR LOAN  <input type="checkbox"/> None    <input type="checkbox"/> Personal residence</p> <p><input type="checkbox"/> Real Property _____  <small>Street address</small>  <small>City</small></p> <p><input type="checkbox"/> Guarantor _____</p> <p><input type="checkbox"/> Other _____  <small>(Describe)</small></p>
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Comments: \_\_\_\_\_