

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Please type or print in ink. NAME OF FILER (LAST) (FIRST) (MIDDLE) DeBock Laurie Ε 1. Office, Agency, or Court Agency Name (Do not use acronyms) Chico Unified School District Division, Board, Department, District, if applicable Your Position Bidwell Jr. High School Assistant Principal ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: \_ 2. Jurisdiction of Office (Check at least one box) ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction) Multi-County \_\_\_\_\_ County of \_ Other Public School District ☐ City of \_\_\_\_\_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2014, through Leaving Office: Date Left \_\_\_\_/\_\_\_ December 31, 2014. (Check one) -or-The period covered is January 1, 2014, through the date of The period covered is \_\_\_\_\_\_\_, through leaving office. December 31, 2014. Assuming Office: Date assumed \_\_\_\_\_/\_\_\_\_ The period covered is \_\_\_\_\_\_, through the date of leaving office. Candidate: Election year \_\_\_\_ \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_ 4. Schedule Summary ▶ Total number of pages including this cover page:  $\frac{3}{2}$ Check applicable schedules or "None." Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property – 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. CA 95926 Chico DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (530) 891-3080 Idebock@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 Signature (month, day, year)

## **SCHEDULE B** Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
Name		

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1030 Broadway	1286 & 1290 Wanderer Lane
CITY	<u></u>
	City
Chico, CA	Chico, CA
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:     \$2,000 - \$10,000     \$10,001 - \$100,000
NATURE OF INTEREST	NATURE OF INTEREST
✓ Ownership/Deed of Trust	✓ Ownership/Deed of Trust
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$\sqrt{\$1,001 - \$10,000}	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	✓ \$10,001 - \$100,000 □ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  None	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  None  John and Tracie Roberts / Cynthia Wysong
business on terms available to members of the public	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and
loans received not in a lender's regular course of bus	siness must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
Comments:	

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

	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name	Name

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
Enloe Medical Center			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
1531 Esplanade			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
Hospital			
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
Registered Nurse			
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED		
S500 - \$1,000 S1,001 - \$10,000	\$500 - \$1,000\$1,001 - \$10,000		
☐ \$10,001 - \$100,000	\$10,001 - \$100,000 OVER \$100,000		
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED		
✓ Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)		
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)		
Sale of	Sale of		
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)		
Loan repayment	Loan repayment		
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more		
(Describe)	(Describe)		
Other	☐ Other		
(Describe)	(Describe)		
▶ 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:			
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)		
ADDRESS (Business Address Acceptable)	% None		
	SECURITY FOR LOAN		
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence		
	Real Property		
HIGHEST BALANCE DURING REPORTING PERIOD	Street address		
\$500 - \$1,000			
\$1,001 - \$10,000	City		
\$10,001 - \$100,000	Guarantor		
OVER \$100,000	Other(Describe)		
	(		
Comments:			