CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Please type or print in ink.

NAME OF FILER
(LAST)        (FIRST)        (MIDDLE)

Govan        Reginald        Bruce

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified

Division, Board, Department, District, if applicable
Chico High

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 Chico
☐ County of ____________________________
☐ Other

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 12/31/2015 through December 31, 2014.

☐ 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.

☐ 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

► Total number of pages including this cover page: ________

☐ 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

5. Verification

MAILING ADDRESS
STREET (Business or Agency Address Recommended - Public Document)

901 Esplanade
Chico

city ca zip code 95928

DAYTIME TELEPHONE NUMBER
( 530 ) 891-3261

E-MAIL ADDRESS
rgovan@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 03/23/2015

(month, day, year) Signature ____________________________

(Fill in original signed statement with your filing official.)