CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Date Initial Filing Received Official Use Drift

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NAME OF FILER (LAST)		(FIRST)	(MIDDLE)	
HEGE	DUS	SUSAN	/V/	
1. Office, Agency, or Court			· · · · · · · · · · · · · · · · · · ·	
Agency Name (Do not use acronyms)		Day 1		
Chico Unified School District		Principal		
Division, Board, Department, District, if applicable	ak School	Your Position •		
► If filing for multiple positions, list below or on a	n attachment. (Do not use	acronyms)		
Agency:		Position:		
2. Jurisdiction of Office (Check at least or	ne 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 b	ow)			
Annual: The period covered is January 1, 20 December 31, 2014.	,	Leaving Office: Date Left (Check one)	me, 20, 2014	
The period covered is/ December 31, 2014.	J, through	•	uary 1, 2014, through the date of	
Assuming Office: Date assumed		The period covered is the date of leaving office.	The period covered is/, through the date of leaving office.	
Candidate: Election year and office sought, if different than Part 1:				
4. Schedule Summary Check applicable schedules or "None." ► Total number of pages including this cover page:				
☐ Schedule A-1 - Investments — schedule attached ☐ Schedule C - Income, Loans, & Business Positions — schedule attached ☐ Schedule D - Income — Gifts — schedule attached ☐ Schedule D - Income — Gifts — schedule attached				
Schedule B - Real Property – schedule attach				
/	-or-			
None - No reportable interests on any schedule				
5. Verification		P		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	STATE	ZIP CODE	
1163 E 7th Streed	Chico	CA	95928	
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS		
(530) 891-3000				
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 frue and correct.				
Date Signed 4/2/15 Signature Sum Megadus				
(month, day, year)		(File the originally signed sta	tement with your filing official.)	