CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Initial Filing
Received
Official Use Only

Please type or print in ink

Department of Sociology
530.898.6364

NAME OF FILER
Fax: 530.898.4571
hsoc1@csuchico.edu
KATHLEEN

(LAST)

(First)

(FIRST)

(MIDDLE)

Office, Agency, or Court
Chico Unified School District

Agency Name (Do not use acronyms)

Board member

Division, Board, Department, District, if applicable

Your Position

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Position:

Jurisdiction of Office (Check at least one box)

Do not use acronyms

County

Butte

Other: Chico Unified School District

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.

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:

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

Schedule F - None - No reportable interests on any schedule

Verification

MAILING ADDRESS

1163 E. 7th St. Chico CA 95926

STREET

(Business or Agency Address Recommended - Public Document)

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER

(530) 891-3000

E-MAIL ADDRESS

KKaiser@csuchico.edu

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: March 6, 2015

Signature: [Signature]

The California State University

FPPC Form 700 (2014/2015)
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
# SCHEDULE B
## Interests in Real Property
(Including Rental Income)

### ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAIR MARKET VALUE</td>
<td></td>
</tr>
<tr>
<td>IF APPLICABLE, LIST DATE:</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td></td>
</tr>
<tr>
<td>NATURE OF INTEREST</td>
<td></td>
</tr>
<tr>
<td>IF RENTAL PROPERTY, GROSS INCOME RECEIVED</td>
<td></td>
</tr>
<tr>
<td>SOURCES OF RENTAL INCOME:</td>
<td></td>
</tr>
<tr>
<td>* You are not required to report loans from commercial lending institutions 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:</td>
<td></td>
</tr>
<tr>
<td>NAME OF LENDER*</td>
<td></td>
</tr>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
<td></td>
</tr>
<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
<td></td>
</tr>
<tr>
<td>INTEREST RATE</td>
<td></td>
</tr>
<tr>
<td>TERM (Months/Years)</td>
<td></td>
</tr>
<tr>
<td>HIGHEST BALANCE DURING REPORTING PERIOD</td>
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### Comments:

```
Rented to son & daughter-in-law & their 3 children
```
**SCHEDULE D**
*Income — Gifts*

<table>
<thead>
<tr>
<th>NAME OF SOURCE (Not an Acronym)</th>
<th>NAME OF SOURCE (Not an Acronym)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isom Advisors</td>
<td>Jones Halp</td>
</tr>
<tr>
<td>1470 Marina Lane, Suite 315, Walnut Creek, CA 94596</td>
<td></td>
</tr>
<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF SOURCE</td>
<td>BUSINESS ACTIVITY, IF ANY, OF SOURCE</td>
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<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF SOURCE</td>
<td>BUSINESS ACTIVITY, IF ANY, OF SOURCE</td>
</tr>
<tr>
<td>DATE (mm/dd/yy)</td>
<td>VALUE</td>
</tr>
<tr>
<td>DATE (mm/dd/yy)</td>
<td>VALUE</td>
</tr>
<tr>
<td>02/15/14</td>
<td>$94.20</td>
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<tr>
<td>12/15/14</td>
<td>$94.20</td>
</tr>
</tbody>
</table>

**Comments:**

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FAIR POLITICAL PRACTICES COMMISSION

FPPC Form 700 (2014/2015) Sch. D
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772  www.fppc.ca.gov