STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER (LAST) (FIRST) (MIDDLE)
McKay, David Stephen

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Principal, Alternative Education

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
☐ County of
☐ Other School district

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2014, through December 31, 2014.
☐ Leasing Office: Date Left __________/________/________
☐ Assumed Office: Date assumed __________/________/________
☐ Leaving Office: Date Left __________/________/________
☐ The period covered is January 1, 2014, through 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 A-2 - Investments - schedule attached
☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule B - Real Property - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached
☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
STREET
(City or Agency Address Recommended - Public Document)
290 East Avenue Chico, CA 95926

DAYTIME TELEPHONE NUMBER
(530) 891-3929

E-MAIL ADDRESS
dmckay@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 3/16/2015
Signature (attach the originally signed statement with your filing office)

FPPC Form 700 (2014/2015)
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/727-3772 www.fppc.ca.gov