STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Schrock   Kristen   Joelle

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Principal

Agency: ____________________________ Position: ____________________________

2. Jurisdiction of Office (Check at least one box)

☐ State
☐ Multi-County
☐ City of Chico
☐ County of Butte
☐ Other Public School District

3. Type of Statement (Check at least one box)

☐ Annual: The period covered is January 1, 2014, through December 31, 2014.
☐ Leaving Office: Date Left: __________ (Check one)
☐ The period covered is __________, through December 31, 2014.
☐ Assuming Office: Date assumed: 07/01/2014
☐ The period covered is __________, through the date of leaving office.

☐ Candidate: Election year: __________ and office sought, if different than Part 1:

☐ None - No reportable interests on any schedule

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
☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

☐ Total number of pages including this cover page: __________

5. Verification

Mailing Address
2090 Amanda Way
Chico, CA 95928

Daytime Telephone Number (530) 891-3285
E-mail Address kschorck@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: 03/30/2015

Signature: [Signature]

[Notary's seal or signature]

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