CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Akers Jacy Dawn

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   Chico Unified School District
   Division, Board, Department, District, if applicable
   Nutrition Services
   Nutrition Supervisor
   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
   □ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
   □ County of ____________________________
   □ Other Public School District

3. Type of Statement (Check at least one box)
   ☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
   -or- The period covered is ___/___/2020, through December 31, 2020.
   □ Leaving Office: Date Left ___/___/______
   -or- The period covered is ___/___/______, through the date of leaving office.
   □ The period covered is ___/___/______, through the date of leaving office.
   □ Assuming Office: Date assumed ___/___/______
   □ Candidate: Date of Election ______________________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) Total number of pages including this cover page: __________
   Schedules attached
   □ 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
   -or- ☒ None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS STREET CITY STATE ZIP CODE
   (Business or Agency Address Recommended - Public Document)
   1163 E. 7th St Chico CA 95928
   DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
   (530) 891-3000 jakers@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 01/06/2021 Signature ____________________________
(month, day, year)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER
(LAST) Mike
(FIRST) Allen
(MIDDLE) Anthony

Office, Agency, or Court

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

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

Jurisdiction of Office (Check at least one box)

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

Jurisdiction of Office (Check at least one box)

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ (Statewide Jurisdiction)
☐ County of
☐ Other Public School District

Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left ________/______/______
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ The period covered is ________/______/______, through the date of leaving office.
☐ Assuming Office: Date assumed ________/______/______
☐ Candidate: Date of Election ________/______/______ and office sought, if different than Part 1:

Schedule Summary (must complete) ► Total number of pages including this cover page:

Schedules attached

☐ Schedule A1 - Investments - schedule attached
☐ Schedule A2 - 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

☐ -or- ☒ None - No reportable interests on any schedule

Verification

MAILING ADDRESS
1071 East 16th Street
Chico, CA 95926

STREET

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER
(530) 891-3100

EMAIL ADDRESS
MAllen@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 1/5/2021

Signature [Signature]

( File the originally signed paper statement with your filing official )
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink:

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Benz Mele Lea

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District

Division, Board, Department, District, if applicable

Your Position
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 ____________________________

☐ County of ____________________________

☒ Other Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.

☐ Leaving Office: Date Left / / 

☐ The period covered is / / , through December 31, 2020.

☐ Assuming Office: Date assumed / / 

☐ The period covered is / / , through the date of leaving office.

☐ Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page:

Schedules attached

☐ 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

☐-or- ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
14264 Kansas Ln Chico CA 95973

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(530) 566-2881 mbenz@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.

Data Signed January 12, 2021

Signature Mele Benz

Digitally signed by Mele Benz
Date: 2021.01.12 09:11:34 -08'00'

(Fill the originally signed paper statement with your filing official.)
**CALIFORNIA FORM 700**
FAIR POLITICAL PRACTICES COMMISSION

**STATEMENT OF ECONOMIC INTERESTS**
**COVER PAGE**
**A PUBLIC DOCUMENT**

Please type or print in ink.

<table>
<thead>
<tr>
<th>NAME OF FILER (LAST)</th>
<th>(FIRST)</th>
<th>(MIDDLE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Besnard</td>
<td>Bruce</td>
<td>Robert</td>
</tr>
</tbody>
</table>

1. **Office, Agency, or Court**
   - Agency Name *(Do not use acronyms)*: Chico Unified School District
   - Division, Board, Department, District, if applicable: Shasta Elementary
   - Your Position: 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
   - [x] County of
   - [x] Other Public School District

3. **Type of Statement (Check at least one box)**
   - -or- The period covered is ______/_____/______, through December 31, 2020.
   - [ ] Leaving Office: Date Left ______/_____/______
     *(Check one circle.)*
   - [ ] The period covered is January 1, 2020, through the date of leaving office.
   - -or- The period covered is ______/_____/______, through the date of leaving office.
   - [ ] Assuming Office: Date assumed ______/_____/______

4. **Schedule Summary (must complete)**
   - Total number of pages including this cover page: ______
   - Schedules attached
     - [ ] 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
   - [ ] None - No reportable interests on any schedule

5. **Verification**
   - MAILING ADDRESS: 1163 E. 7th Street, Chico, CA 95973
   - DAYTIME TELEPHONE NUMBER: (530) 891-3141
   - EMAIL ADDRESS: bbesnard@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: February 19, 2021
   - (Month, day, year)
   - Signature: [Signature]

(Fill the originally signed paper statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER
(last) (first) (middle)
Bettencourt Jo Ann F

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   Chico Unified School District
   Division, Board, Department, District, if applicable
   Rosedale Elementary School
   Your Position
   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 ____________________________
       □ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
         (Statewide Jurisdiction)
       □ County of ____________________________
       □ Other Public School District

3. Type of Statement (Check at least one box)
   □ Annual: The period covered is January 1, 2020, through December 31, 2020.
   -or-
     The period covered is __________/________, through December 31, 2020.
   □ Leaving Office: Date Left __________/________/________
      (Check one circle.)
     □ The period covered is January 1, 2020, through the date of leaving office.
       -or-
     □ The period covered is __________/________, through the date of leaving office.
   □ Assuming Office: Date assumed __________/________/________
   □ Candidate: Date of Election __________/________/________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: _________
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   □ 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
   -or- □ None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS: 1163 E. 7th Street Chico, CA 95928
   STREET: 1163 E. 7th Street
   CITY: Chico
   STATE: CA
   ZIP CODE: 95928
   DAYTIME TELEPHONE NUMBER: (530) 891-3104
   EMAIL ADDRESS
   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 02/09/2021
   Signature ____________________________
   (File the originally signed paper statement with your filing official.)
SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

1. BUSINESS ENTITY OR TRUST
Chico Turf Plus LLC
Name
3030 Thorntrout Dr. Ste 3 Chico, CA 95973
Address (Business Address Acceptable)
Check one
☐ Trust, go to 2  ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Chemical Lawn Care

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
$0 - $1,999
$2,000 - $10,000
$10,001 - $100,000
$100,001 - $1,000,000
Over $1,000,000

ACQUIRED DISPOSED

20 20

NATURE OF INVESTMENT
☐ Partnership ☐ Sole Proprietorship ☒ LLC Other

YOUR BUSINESS POSITION
Vice President

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

$0 - $499 ☐
$500 - $1,000 ☒ OVER $100,000
$1,001 - $10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary)
None ☐ or ☒ Names listed below

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, Investment, or Assessor’s Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
$2,000 - $10,000
$10,001 - $100,000
$100,001 - $1,000,000
Over $1,000,000

ACQUIRED DISPOSED

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

Leasehold ☐ Yrs. remaining: ☐ Other

Check box if additional schedules reporting investments or real property are attached

Comments:
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER
(LAST)    (FIRST)    (MIDDLE)
Beyers    Gloria    Jean

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Personnel Commission Chair
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 Public School District

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left ______/_____/_______.
☐ The period covered is January 1, 2020, through the date of
☐ -or- Leaving Office: Date of Office Covered: Date assumed ______/_____/_______.
leaving office.
☐ The period covered is ______/_____/_______. through
☐ -or-
the date of leaving office.
☐ Candidate: Date assumed ______/_____/_______. and office sought, if different than Part 1:

4. Schedule Summary (must complete)  Total number of pages including this cover page: __________
Schedules attached
☐ 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
-or- ☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
(STREET)    CITY    STATE    ZIP CODE
(Recommended: Public Document)
105 S E. 7th St.    Chico    CA    95928

DAYTIME TELEPHONE NUMBER
(920) 225-9101

EMAIL ADDRESS
gbevers@pachell.net

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: 3/8/2021

Signature: Gloria Beyers

(Fill out signature in ink on this cover sheet only. This signature is not to be used on any accompanying schedule.)
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Bultema Kevin James

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   Chico Unified School District
   Division, Board, Department, District, if applicable
   Business Services
   Your Position
   Assistant Superintendent
   → 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
   □ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
     (Statewide Jurisdiction)
   □ Multi-County __________________________
   □ County of __________________________
   □ City of __________________________
   □ Other Public School District

3. Type of Statement (Check at least one box)
   ☒ Annual: The period covered is January 1, 2020, through
     -or-
     The period covered is __/__ ______, through
   □ Leaving Office: Date Left __/__ ______
   (Check one circle.)
   □ The period covered is January 1, 2020, through the date of
     leaving office.
   -or-
   □ The period covered is __/__ ______, through
     the date of leaving office.
   □ Assuming Office: Date assumed __/__ ______
   □ Candidate: Date of Election __/__ ______ and office sought, if different than Part 1:

4. Schedule Summary (must complete)  ▶ Total number of pages including this cover page: ________
   Schedules attached
   □ 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
   -or- □ None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS
   (Business or Agency Address Recommended - Public Document)
   1163 E. 7th Street
   City __________________________
   State CA
   Zip Code 95928

   DAYTIME TELEPHONE NUMBER __________________________
   (530) 891-3000
   EMAIL ADDRESS kbultema@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 __________
   (month, day, year)
   Signature __________________________
# SCHEDULE B

**Interests in Real Property**
*(Including Rental Income)*

<table>
<thead>
<tr>
<th>ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>548 W. 4th Avenue</td>
</tr>
<tr>
<td>CITY</td>
</tr>
<tr>
<td>Chico</td>
</tr>
</tbody>
</table>

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**IF APPLICABLE, LIST DATE:**

- 1/20
- 1/20

**NATURE OF INTEREST**

- Ownership/Deed of Trust
- Easement
- Leasehold

- Yrs. remaining
- Other

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

- $0 - $499
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

**SOURCES OF RENTAL INCOME:** If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

- None

---

*You are not required to report loans from a commercial lending institution 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:*

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
</tbody>
</table>

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**

- %
- None

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

- Guarantor, if applicable

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
</tbody>
</table>

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**

- %
- None

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

- Guarantor, if applicable

**Comments:**
California Form 700: **Kevin J. Bultema**  
Statement of Economic Interests 2020  
Item 1: Attachment

<table>
<thead>
<tr>
<th>Agency</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Butte Schools Self-Funded Programs</td>
<td>Board Member</td>
</tr>
<tr>
<td>North Valley Self Insurance Group</td>
<td>Board Member</td>
</tr>
<tr>
<td>Northern California Schools Insurance Group</td>
<td>Board Member</td>
</tr>
<tr>
<td>Butte County Consolidated Oversight Board</td>
<td>Board Member</td>
</tr>
</tbody>
</table>
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Caldera Pedro Altamirano

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Chico Junior
Your Position
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
☐ County of
☐ Other Public School District
☐ Judge, Retired Judge, Pro Temp Judge, or Court Commissioner (Statewide Jurisdiction)

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ or-
The period covered is ____________/__________/__________, through December 31, 2020.
☐ Leaving Office: Date Left ____________/__________/__________ (Check one circle.)
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ or-
The period covered is ____________/__________/__________, through the date of leaving office.
☐ Assuming Office: Date assumed ____________/__________/__________
☐ Candidate: Date of Election ____________/__________/__________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: ____________

Schedules attached
☐ 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
☐ Schedule F - Other Financial Interests - schedule attached
☐ Schedule G - Other Financial Interests - schedule attached
☐ Schedule H - Other Financial Interests - schedule attached
☐ Schedule I - Other Financial Interests - schedule attached
☐ Schedule J - Other Financial Interests - schedule attached
☐ Schedule K - Other Financial Interests - schedule attached
☐ Schedule L - Other Financial Interests - schedule attached
☐ Schedule M - Other Financial Interests - schedule attached
☐ Schedule N - Other Financial Interests - schedule attached
☐ Schedule O - Other Financial Interests - schedule attached
☐ Schedule P - Other Financial Interests - schedule attached
☐ Schedule Q - Other Financial Interests - schedule attached
☐ Schedule R - Other Financial Interests - schedule attached
☐ Schedule S - Other Financial Interests - schedule attached
☐ Schedule T - Other Financial Interests - schedule attached
☐ Schedule U - Other Financial Interests - schedule attached
☐ Schedule V - Other Financial Interests - schedule attached
☐ Schedule W - Other Financial Interests - schedule attached
☐ Schedule X - Other Financial Interests - schedule attached
☐ Schedule Y - Other Financial Interests - schedule attached
☐ Schedule Z - Other Financial Interests - schedule attached
☐ or-
☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
280 Memorial Chico Ca 95926

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(530) 891-3066 ext. 208 pcaldera@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 01/05/2021 Signature Pedro A. Caldera
(month, day, year) (Print the originally signed paper statement with your filing official.)
**SCHEDULE B**

**Interests in Real Property**

*(Including Rental Income)*

**Name**

*Pedro A. Caldera*

---

**ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS**

2272 Holly Avenue

**CITY**

Chico

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**IF APPLICABLE, LIST DATE:**

- 1/20 /20
- 1/20 DISPOSED

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**NATURE OF INTEREST**

- Ownership/Deed of Trust
- Easement
- Leasehold
  - Yes, remaining
  - Other
- Leasehold
  - Yes, remaining
  - Other

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

- $0 - $499
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

**SOURCES OF RENTAL INCOME:** If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

- None

Keri Smith

---

*You are not required to report loans from a commercial lending institution 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:*

**NAME OF LENDER**

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**

<table>
<thead>
<tr>
<th>%</th>
<th>None</th>
</tr>
</thead>
</table>

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 to $1,000
- $1,001 to $10,000
- $10,001 to $100,000
- OVER $100,000

**Guarantor, if applicable**

---

**NAME OF LENDER**

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**

<table>
<thead>
<tr>
<th>%</th>
<th>None</th>
</tr>
</thead>
</table>

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 to $1,000
- $1,001 to $10,000
- $10,001 to $100,000
- OVER $100,000

**Guarantor, if applicable**

---

**Comments:**
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
CHIPEN JESSICA THATS

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Chico Senior High School
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
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ County of
☐ Other Public School District

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left: ____________________________
☐ -or-
☐ The period covered is ___________ / ___________ , through December 31, 2020.
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ -or-
☐ Assuming Office: Date assumed ___________ / ___________
☐ -or-
☐ The period covered is ___________ / ___________ , through the date of leaving office.
☐ Candidate: Date of Election ___________ / ___________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) Total number of pages including this cover page:
☐ Schedules attached
☐ 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
☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS 2400 Memorial Way, Chico CA
STREET 95926
CITY STATE ZIP CODE

DAYTIME TELEPHONE NUMBER (530) 991-3066
EMAIL ADDRESS jessica.chipen@oud.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 ____________________________ Signature ____________________________________
(month, day, year)
CALIFORNIA FORM 700  
FAIR POLITICAL PRACTICES COMMISSION  

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER  
(LAST)  
Cariss

(First)  
Timothy

(Middle)  
Andrew

1. Office, Agency, or Court

Agency Name  (Do not use acronyms)  
Chico Unified School District

Division, Board, Department, District, if applicable  
Director

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  
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)

☐ Multi-County  
☐ County of  
☐ City of  
☐ Other  
Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.

☐-or- The period covered is / / , through December 31, 2020.

☐ Assuming Office: Date assumed / / 

☐ Candidate: Date of Election and office sought, if different than Part 1:

☐ Leaving Office: Date Left / / 

☐ The period covered is January 1, 2020, through the date of leaving office.

☐-or- The period covered is / / , through the date of leaving office.

4. Schedule Summary (must complete)  
Total number of pages including this cover page: ________

Schedules attached

☐ Schedule A-1 - Investments  
☐ Schedule C - Income, Loans, & Business Positions

☐ Schedule A-2 - Investments  
☐ Schedule D - Income - Gifts

☐ Schedule B - Real Property  
☐ Schedule E - Income - Gifts - Travel Payments

☐-or- ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS  
STREET  
(City or Agency Address Recommended - Public Document)
1163 East Seventh St.  
Chico  
CA  
95928

DAYTIME TELEPHONE NUMBER  
(530 ) 891-3000 ext. 20230

EMAIL ADDRESS  
tcariss@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  
2/10/21  
[month, day, year]  
Signature  
(Fill in original as a paper statement with your filing officer.)
NAME OF FILER (LAST)  (FIRST)  (MIDDLE)
CARVER  John  WAYNE

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

Your Position
Director Maintenance/Operations/Teams

► 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                                                  ☐ Judge, Retired Judge, Pro Temp Judge, or Court Commissioner
☐ Multi-County                                          (Statewide Jurisdiction)
☐ City of                                                ☐ County of
☐ Other Public School District

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __/__/____. (Check one circle.)
- or- The period covered is __/__/____, through December 31, 2020.
☐ The period covered is January 1, 2020, through the date of leaving office.
- or- The period covered is __/__/____, through the date of leaving office.
☐ Assuming Office: Date assumed __/__/____
☐ Candidate: Date of Election __/__/____ and office sought, if different than Part 1:

4. Schedule Summary (must complete)
► Total number of pages including this cover page: ________

Schedules attached
☐ 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

- or- ☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
3655 Chemichal Dr.  Chico  CA  95928
(Business or Agency Address Recommended - Public Document)
STREET
CITY
STATE  ZIP CODE

DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
(530) 634-7411  jcarvel@chico.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 01/05/2021  Signature  
(Month, day, year)  (Fit the originally signed paper statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Chairez Sydney B.

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   Chico Unified School District
   Division, Board, Department, District, if applicable
   Nutrition Services
   Your Position
   Nutrition Specialist
   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
   [X] Other Public School District

3. Type of Statement (Check at least one box)
   -or-
   The period covered is / / , through December 31, 2020.
   [ ] Assuming Office: Date assumed / / 
   [ ] Candidate: Date of Election and office sought, if different than Part 1:
   [ ] Leaving Office: Date Left / / 
   (Check one circle.)
   [ ] The period covered is January 1, 2020, through the date of leaving office.
   -or-
   The period covered is / / , through the date of leaving office.

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: 23

Schedules attached
   [ ] Schedule A-1 - Investments - schedule attached
   [ ] Schedule A-2 - Investments - schedule attached
   [X] 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
-OR- [X] None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS STREET CITY STATE ZIP CODE
   (Business or Agency Address Recommended - Public Document)
   1163 E 7th Street Chico CA 95928
   DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
   (530) 720-1594 schairez@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 1/6/2021 Signature
(month, day, year)

FPPC Form 700 - Cover Page (2020/2021)
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page - 5
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified

Division, Board, Department, District, if applicable

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 __________________

☐ County of __________________

☐ City of __________________

☒ Other Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.

☐ or-

The period covered is __________/________/________, through December 31, 2020.

☐ Assuming Office: Date assumed __________/________/________

☐ Leaving Office: Date Left __________/________/________

(Leave one circle.)

☐ The period covered is January 1, 2020, through the date of leaving office.

☐ or-

The period covered is __________/________/________, through the date of leaving office.

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

4. Schedule Summary (must complete) ► Total number of pages including this cover page: ________

Schedules attached

☐ 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

☐ or- ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
2971 Sandi Drive
Chico
CA
95973

STREET

CITY

STATE

ZIP CODE

(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER
(530) 891-3297

EMAIL ADDRESS
ccconnelly@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 January 11, 2021

Signature [signature]

(File the originally signed copy statement with your filing official.)
NAME OF FILER (LAST)  (FIRST)  (MIDDLE)
Copper  Dustin  Todd

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
Chico Unified School District

Division, Board, Department, District, if applicable    Your Position
M&O  M&O Manager

*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

☐ County of

☐ City of

☐ Other Public School District

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

☐ Annual: The period covered is January 1, 2020, through December 31, 2020.

☐ Leaving Office: Date Left ___/___/______

☐ The period covered is ___/___/______, through December 31, 2020.

☐ The period covered is ___/___/______, through the date of leaving office.

☐ Assuming Office: Date assumed ___/___/______

☐ Candidate: Date of Election ___/___/______ and office sought, if different than Part 1:

4. Schedule Summary *(must complete)  Total number of pages including this cover page: _________

Schedules attached

☐ 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

5. Verification

MAILING ADDRESS          STREET          CITY          STATE          ZIP CODE
2455 Carmichael Drive    Chico            CA            95928

DAYTIME TELEPHONE NUMBER          EMAIL ADDRESS
(530) 891-3095              dcooper@cusd.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 1/5/2021

(month, day, year)   Signature

*Please the original signed paper statement with your filing official.*
STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A PUBLIC DOCUMENT

NAME OF FILER (LAST) Dalby

(First) Caitlin

(MIDDLE) Marie

1. Office, Agency, or Court

Agency Name: Chico Unified School District

Division, Board, Department, District, if applicable: Governing Board

Your Position: Trustee

► 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

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)

☐ Other Public School District

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

☐ Annual: The period covered is January 1, 2019, through December 31, 2019.

☐ Leaving Office: Date Left ______ / ______ / ______

☐ The period covered is ______ / ______ / ______, through December 31, 2019.

☐ The period covered is ______ / ______ / ______, through the date of leaving office.

☐ Assuming Office: Date assumed ______ / ______ / ______

☐ Other

☐ Candidate: Date of Election ______ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page:

Schedules attached

☒ 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

PO Box 893

Forest Ranch CA 95942

STREET

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER

(530) 258-6393

EMAIL ADDRESS

caitlin.dalby@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 2/19/2021

(month, day, year)

Signature Caitlin Marie Dalby

(File the originally signed paper statement with your filing or call.)
## SCHEDULE A-1

**Investments**

**Stocks, Bonds, and Other Interests**

*(Ownership Interest is Less Than 10%)*

*Investments must be itemized.
Do not attach brokerage or financial statements.*

<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Amazon.com Inc</strong></td>
</tr>
<tr>
<td><strong>Information Tech &amp; Retail</strong></td>
</tr>
</tbody>
</table>

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $100,001 - $1,000,000
- Over $1,000,000

**NATURE OF INVESTMENT**

- Stock
- Other

(IF Described)
- Partnership
- Income Received of $0 - $499
- Income Received of $500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

- / / 19
  - ACQUIRED
  - DISPOSED

<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Apple Inc</strong></td>
</tr>
<tr>
<td><strong>Consumer Electronics &amp; Software</strong></td>
</tr>
</tbody>
</table>

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $100,001 - $1,000,000
- Over $1,000,000

**NATURE OF INVESTMENT**

- Stock
- Other

(IF Described)
- Partnership
- Income Received of $0 - $499
- Income Received of $500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

- / / 19
  - ACQUIRED
  - DISPOSED

<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>****</td>
</tr>
</tbody>
</table>

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $100,001 - $1,000,000
- Over $1,000,000

**NATURE OF INVESTMENT**

- Stock
- Other

(IF Described)
- Partnership
- Income Received of $0 - $499
- Income Received of $500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

- / / 19
  - ACQUIRED
  - DISPOSED

<table>
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<tr>
<th>NAME OF BUSINESS ENTITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>****</td>
</tr>
</tbody>
</table>

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $100,001 - $1,000,000
- Over $1,000,000

**NATURE OF INVESTMENT**

- Stock
- Other

(IF Described)
- Partnership
- Income Received of $0 - $499
- Income Received of $500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**

- / / 19
  - ACQUIRED
  - DISPOSED

---

**Comments:**
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
DeBock Laurie E.

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Bidwell Jr. High School
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 ___________________________
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of ___________________________
- Other Public School District

3. Type of Statement (Check at least one box)
- Annual: The period covered is January 1, 2020, through December 31, 2020.
- Leaving Office: Date Left __/__/____
- The period covered is __/__/____, through December 31, 2020.
- The period covered is __/__/____, through the date of leaving office.
- Assuming Office: Date assumed __/__/____
- The period covered is __/__/____, through the date of leaving office.
- Candidate: Date of Election __/__/____ and office sought, if different than Part 1.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _________
Schedules attached
- 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
- None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
2376 North Ave. Chico CA 95926

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(530) 891-3080 idebock@chicoisd.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 1-21-2021 Signature ___________________________
(month, day, year)

Calif FPPC Form 700 - Cover Page (2020/2021)
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page - 5
**SCHEDULE B**  
*Interests in Real Property*  
*(Including Rental Income)*

### ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS

1286 & 1290 Wanderer Ln.

### CITY

chico

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td>/ /20</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>/ /20</td>
</tr>
<tr>
<td>x $100,001 - $1,000,000</td>
<td>/acquired</td>
</tr>
<tr>
<td>OVER $1,000,000</td>
<td>DISPOSED</td>
</tr>
</tbody>
</table>

**NATURE OF INTEREST**

- [x] Ownership / Deed of Trust  
- [ ] Easement  
- [ ] Leasehold  
- [ ] Yrs. remaining  
- [ ] Other  

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

- [ ] $0 - $499  
- [ ] $500 - $1,000  
- [x] $1,001 - $10,000  
- [ ] $10,001 - $100,000  
- [ ] OVER $100,000

**SOURCES OF RENTAL INCOME**: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

- [ ] None

1290 Wanderer Ln. - Derek and Cody Johnson  
1286 Wanderer Ln. - Jacob Boulant

---

*You are not required to report loans from a commercial lending institution 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:*

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
</tr>
<tr>
<td>INTEREST RATE</td>
</tr>
<tr>
<td>TERM (Months/Years)</td>
</tr>
<tr>
<td>[%] [ ] None</td>
</tr>
<tr>
<td>HIGHEST BALANCE DURING REPORTING PERIOD</td>
</tr>
<tr>
<td>[$500 - $1,000] [ ] [$1,001 - $10,000] [x]</td>
</tr>
<tr>
<td>[ ] $10,001 - $100,000 [ ] OVER $100,000</td>
</tr>
<tr>
<td>[ ] Guarantor, if applicable</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
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</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
</tr>
<tr>
<td>INTEREST RATE</td>
</tr>
<tr>
<td>TERM (Months/Years)</td>
</tr>
<tr>
<td>[%] [ ] None</td>
</tr>
<tr>
<td>HIGHEST BALANCE DURING REPORTING PERIOD</td>
</tr>
<tr>
<td>[$500 - $1,000] [ ] [$1,001 - $10,000] [ ]</td>
</tr>
<tr>
<td>[ ] $10,001 - $100,000 [ ] OVER $100,000</td>
</tr>
<tr>
<td>[ ] Guarantor, if applicable</td>
</tr>
</tbody>
</table>
**SCHEDULE C**

**Income, Loans, & Business Positions**
(Other than Gifts and Travel Payments)

<table>
<thead>
<tr>
<th>1. INCOME RECEIVED</th>
<th>1. INCOME RECEIVED</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NAME OF SOURCE OF INCOME</strong></td>
<td><strong>NAME OF SOURCE OF INCOME</strong></td>
</tr>
<tr>
<td><strong>Enloe Medical Center</strong></td>
<td><strong>Address (Business Address Acceptable)</strong></td>
</tr>
<tr>
<td><strong>1531 Esplanade</strong></td>
<td><strong>Business Activity, If Any, Of Source</strong></td>
</tr>
<tr>
<td><strong>Hospital</strong></td>
<td><strong>Your Business Position</strong></td>
</tr>
<tr>
<td><strong>Registered Nurse</strong></td>
<td><strong>Gross Income Received</strong></td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
<td></td>
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<tr>
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</tr>
<tr>
<td><strong>Consideration For Which Income Was Received</strong></td>
<td><strong>Consideration For Which Income Was Received</strong></td>
</tr>
<tr>
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</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, 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>
</tr>
<tr>
<td><strong>Name Of Lender</strong></td>
</tr>
<tr>
<td>dfsdfsdf</td>
</tr>
<tr>
<td><strong>Address (Business Address Acceptable)</strong></td>
</tr>
<tr>
<td>dfsdfsdf F</td>
</tr>
<tr>
<td><strong>Business Activity, If Any, Of Lender</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Comments</strong>: fFDSFSDF</td>
</tr>
</tbody>
</table>

**NAME OF SOURCE OF INCOME**

**Address (Business Address Acceptable)**

**Business Activity, If Any, Of Source**

**Your Business Position**

**Gross Income Received**

**Consideration For Which Income Was Received**

**Security For Loan**

**Interest Rate**

**Term (Months/Years)**

**Real Property**

**Street Address**

**City**

**Guarantor**

**fsdFDF**

**fsdaf**

**Other**

*(Describe)*
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
De Luna Amy Marie

1. Office, Agency, or Court

Agency Name: (Do not use acronyms)
Chico Unified School District

Division, Board, Department, District, if applicable

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

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
  (Statewide Jurisdiction)

☐ County of

☐ Other Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.

- or -

The period covered is ______/_______/________, through December 31, 2020.

☐ Assuming Office: Date assumed ______/_______/________

☐ Leaving Office: Date Left ______/_______/________

☐ Candidate: Date of Election ______/_______/________ and office sought, if different than Part 1:

☐ The period covered is January 1, 2020, through the date of leaving office.

- or -

The period covered is ______/_______/________, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: ______

Schedules attached

☒ Schedule A - 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

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
1423 Scottsdale Court
Chico, CA 95926

STREET

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER
(530) 891-3000

EMAIL ADDRESS
adeluna@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 1/5/2021

(month, day, year)

Signature:

(If the signature appears on an attached paper statement with your filing official.)
Enserro  Joseph  Patrick

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
CUSD Chico Unified School District
Division, Board, Department, District, if applicable
NUtrition
Your Position
Director
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 ____________________________
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
☐ County of ____________________________
☒ Other Public School District

3. Type of Statement (Check at least one box)
☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __ / __ / ____________
☐ The period covered is __ / __ / ____________, through December 31, 2020.
☐ The period covered is __ / __ / ____________, through the date of leaving office.
☐ Assuming Office: Date assumed __ / __ / ____________
☐ Candidate: Date of Election ____________ and office sought, if different than Part 1:

4. Schedule Summary (must complete)  Total number of pages including this cover page: __________

Schedules attached
☐ 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

☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
(Business or Agency Address Recommended - Public Document)
chico
STREET
ca
CITY
95973
STATE
ZIP CODE

DAYTIME TELEPHONE NUMBER
(530) 8913000
EMAIL ADDRESS
venserro@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 1.6.2021
(month, day, year)  Signature (Print the originally signed paper statement with your filing official.)
**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
*A PUBLIC DOCUMENT*

Please type or print in ink.

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>(LAST)</th>
<th>(FIRST)</th>
<th>(MIDDLE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>French</td>
<td>Marcus</td>
<td>Edward</td>
<td></td>
</tr>
</tbody>
</table>

1. **Office, Agency, or Court**  
   Agency Name *(Do not use acronyms)*  
   Chico Unified School District  
   Division, Board, Department, District, if applicable  
   Buyer  
   Your Position  
   » 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  
   □ County of  
   □ City of  
   □ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner *(Statewide Jurisdiction)*  
   □ County of  
   □ City of  

3. **Type of Statement** *(Check at least one box)*  
   □ Annual: The period covered is January 1, 2020, through December 31, 2020.  
   - or -  
   The period covered is / / , through December 31, 2020.  
   □ Leaving Office: Date Left / /  
   (Check one circle)  
   □ The period covered is January 1, 2020, through the date of leaving office.  
   - or -  
   The period covered is / / , through the date of leaving office.  
   □ Assuming Office: Date assumed / /  
   □ Candidate: Date of Election and office sought, if different than Part 1:  

4. **Schedule Summary** *(must complete)*  
   □ Total number of pages including this cover page:  
   □ Schedules attached  
   □ 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  
   □ None - No reportable interests on any schedule

5. **Verification**  
   Mailing Address  
   (Business or Agency Address Recommended - Public Document)  
   1163 East Seventh Street  
   Chico  
   CA  
   95928  
   Daytime Telephone Number  
   (530) 891-3000  
   Email Address  
   mfrench@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: 2/9/2021  
   Signature:  
   (File the original signed paper statement with your filing official)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Gallaty Joseph Nelson

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
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
☐ County of
☐ Other Public School District

3. Type of Statement (Check at least one box)
☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left ______/_____/______
☐ The period covered is ______/_____/______, through December 31, 2020.
☐ The period covered is ______/_____/______, through the date of leaving office.
☐ The period covered is ______/_____/______, through the date of leaving office.
☐ Assuming Office: Date assumed ______/_____/______
☐ Candidate: Date of Election _______ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: ________
Schedules attached
☐ 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

- or- ☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
1163 E. Seventh St. Chico CA 95928

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(530) 891-3000 jgallaty@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 ______/_____/______ Signature

[Signature]

(Include the originally signed paper statement with your filing officer.)

FPPC Form 700 - Cover Page (2020/2021)
advice@fppc.ca.gov 866-275-3772 www.fppc.ca.gov
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
German Eric Johan

1. Office, Agency, or Court
Agency Name: (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Maintenance and Operations
Your Position
Maintenance Manager
If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: NA
Position: 

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

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

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Assuming Office: Date assumed ___/___/_______ and office sought, if different than Part 1:

☐ Leaving Office: Date Left ___/___/_______
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ The period covered is ___/___/_______, through the date of leaving office.

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: _______

Schedules attached
☐ 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

☐ or- ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
1163 East 7th Street
Chico, Ca 95928

STATE ZIP CODE
(City or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER
(530) 891-3000

EMAIL ADDRESS
Egerman@chicoused.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 1/5/21

(Date, month, day, year)

Signature

(Fill the originally signed paper statement with your filing official.)
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink:

NAME OF FILER: Griffin Elizabeth Ann

1. Office, Agency, or Court
   Agency Name: Chico Unified School District
   Division, Board, Department, District, if applicable: Board of Education
   Your Position: Trustee
   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: Public School District
   Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
   Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
   The period covered is January 1, 2020, through December 31, 2020.
   The period covered is through December 31, 2020.
   Assuming Office: Date assumed
   Candidate: Date of Election and office sought, if different than Part 1:

3. Type of Statement (Check at least one box)
   □ Annual: The period covered is January 1, 2020, through December 31, 2020.
   □ Leaving Office: Date Left
   □ The period covered is January 1, 2020, through the date of leaving office.
   □ The period covered is through the date of leaving office.

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: 4
   Schedules attached
   □ 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
   □ None - No reportable interests on any schedule

5. Verification
   Mailing Address: 605 Sycamore St, Chico, CA 95928
   Street Address: Sycamore St, Chico, CA
   City: Chico
   State: CA
   Zip Code: 95928
   Daytime Telephone Number: (530) 864-0549
   Email Address: griffineea@att.net
   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: 2-21-21
Signature: Elizabeth Griffin

(For the originally signed paper statement with your filing official)
SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one
☐ Trust, go to 2  ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

Contractor for Fueling Systems

fair market value

If Applicable, List Date:

☐ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☒ $100,001 - $1,000,000
☐ Over $1,000,000

Nature of Investment

☐ Partnership
☐ Sole Proprietorship
☒ Corporation

Your Business Position

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☒ $0 - $499
☐ $500 - $1,000
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ Over $100,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary)

☐ None
☐ Names listed below

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT
☐ REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

FAIR MARKET VALUE

If Applicable, List Date:

☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

Nature of Interest

☐ Property Ownership/Deed of Trust
☐ Stock
☐ Partnership

☐ Leasehold
☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

Note: The form is incomplete and contains placeholders where details are not filled in.
**SCHEDULE B**

*Interests in Real Property (Including Rental Income)*

<table>
<thead>
<tr>
<th>ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS</th>
<th>ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>605 Sycamore St.</td>
<td>620 Sycamore St.</td>
</tr>
<tr>
<td>Chico, CA</td>
<td>Chico, CA</td>
</tr>
</tbody>
</table>

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**IF APPLICABLE, LIST DATE:**

- 1/20
- 1/20

**ACQUIRED**

**DISPOSED**

**NATURE OF INTEREST**

- Ownership/Deed of Trust
- Easement

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

- $0 - $499
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- Over $100,000

**SOURCES OF RENTAL INCOME:** If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

- None

**Michael Polsan**

---

"* You are not required to report loans from a commercial lending institution 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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
</tbody>
</table>

| BUSINESS ACTIVITY, IF ANY, OF LENDER |

<table>
<thead>
<tr>
<th>INTEREST RATE</th>
<th>TERM (Months/Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________%</td>
<td>None</td>
</tr>
</tbody>
</table>

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- Over $100,000
- Guarantor, if applicable

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
</tbody>
</table>

| BUSINESS ACTIVITY, IF ANY, OF LENDER |

<table>
<thead>
<tr>
<th>INTEREST RATE</th>
<th>TERM (Months/Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________%</td>
<td>None</td>
</tr>
</tbody>
</table>

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- Over $100,000
- Guarantor, if applicable

Comments: ____________

FPPC Form 700 - Schedule B (2020/2021)
devices@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page - 11
**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

**ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS**

**CITY**
Chico, CA

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td>1/20 1/20</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>ACQUIRED  ACQUIRED</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td></td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
</tr>
</tbody>
</table>

**NATURE OF INTEREST**

- [ ] Ownership/Deed of Trust
- [ ] Easement
- [ ] Leasehold

- [ ] Years remaining
- [ ] Other

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

- [ ] $0 - $499
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000

**SOURCES OF RENTAL INCOME:** If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

- [ ] None

**Comments:**

---

*You are not required to report loans from a commercial lending institution 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:

**NAME OF LENDER**

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**

- [%]
- [ ] None

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**

- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000
- [ ] Guarantor, if applicable

---

**NAME OF LENDER**

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**

- [%]
- [ ] None

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**

- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000
- [ ] Guarantor, if applicable

---

* FPPC Form 700 - Schedule B (2020/2021)  
* advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov  
* Page - 11
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.
NAME OF FILER (LAST) (FIRST) (MIDDLE)
Gunderson John Allen

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Your Position
Vice 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
☐ Judge, Retired Judge, Pro Temp Judge, or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other Public School District

3. Type of Statement (Check at least one box)
☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __/__/______
(Do not use acronyms.)
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ The period covered is __/__/______, through the date of leaving office.

4. Schedule Summary (must complete) ☒ Total number of pages including this cover page: __________
Schedules attached
☐ 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

☐ or- ☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
(530) 891-3092 EMAIL ADDRESS

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 1/5/21
(month, day, year) Signature

(Write the original signed paper statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Hanlon, Ill James Terrence

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Human Resources Department
Your Position
Assistant Superintendent
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

□ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)
□ County of
□ Other Public School District

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

□ Annual: The period covered is January 1, 2020, through December 31, 2020.
□ Leaving Office: Date Left __/__/________
(The period covered is __/__/2020, through December 31, 2020.
□ The period covered is January 1, 2020, through the date of leaving office.
□ The period covered is __/__/________, through the date of leaving office.
□ Assuming Office: Date assumed __/__/________
□ Candidate: Date of Election ____________ and office sought, if different than Part 1:

4. Schedule Summary (must complete)

Total number of pages including this cover page: __________

Schedules attached

□ 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

□ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
1163 East Seventh Street
(City or Agency Address Recommended - Public Document)

STREET
Chico

CITY
STATE California
ZIP CODE 95928

DAYTIME TELEPHONE NUMBER (530) 891-3000 ext. 20133

EMAIL ADDRESS jhanlon@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 1/7/21
(month, day, year)

Signature

(To be signed only if signed paper statement with your last name only)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Business Services
Your Position: Director, Fiscal Services
Agency: ____________________________
Position: ____________________________

2. Jurisdiction of Office (Check at least one box)
☐ State
☐ Multi-County
☐ City of
☐ County of
☐ Other Public School District

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left ___/___/_____.
☐ The period covered is January 1, 2020, through the date of
leaving office.
☐ The period covered is ___/___/_____. through
the date of leaving office.
☐ Assuming Office: Date assumed ___/___/_____.
☐ Candidate: Date of Election __ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: _________
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☐ Schedule A-1 - Investments - schedule attached
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☐ 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

-or- ☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
STREET
(City or Agency Address Recommended - Public Document)

DAY TIME TELEPHONE NUMBER
(530) 891-3800

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 2/22/21
(month, day, year)
Signature ____________________________
(Provide the original signed paper statement along with your facsimile)

FPPC Form 700 - Cover Page (2020/2021)
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page - 5
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Heath Shawneese Cunningham

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Marigold Elementary School
Your Position
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 _____________________________
☐ County of _____________________________
☑ Other Public School District

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left ______/______/______
☐ The period covered is ______/______/______, through December 31, 2020.
☐ The period covered is ______/______/______, through the date of leaving office.
☐ Assuming Office: Date assumed ______/______/______
☐ The period covered is ______/______/______, through the date of leaving office.

☐ Candidate: Date of Election ______/______/______ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: ________
Schedules attached
☐ 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

►-☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
2446 Marigold Avenue Chico CA 95926

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(530) 891-3121 sheath@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 January 6, 2021 Signature _____________________________
(month, day, year) (File the originally-signed paper statement with your filing official.)
**STATEMENT OF ECONOMIC INTERESTS**

**COVER PAGE**

A PUBLIC DOCUMENT

---

**NAME OF FILER**

Holen

**LAST**

Deanna

**MIDDLE**

Lynn

---

1. **Office, Agency, or Court**

   **Agency Name** (Do not use acronyms)
   Chico Unified School District

   **Division, Board, Department, District, if applicable**

   **Your Position**
   Assistant Principal

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

---

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

   [ ] State

   [ ] Multi-County

   [ ] City of

   [x] County of

   [x] Other Public School District

---

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


   [ ] -or- The period covered is / / , through December 31, 2020.

   [ ] Assumed Office: Date assumed / / 

---

4. **Schedule Summary (must complete)**

   **Total number of pages including this cover page:**

   ➤ **Schedules attached**

   [ ] Schedule A-1 - Investments - schedule attached

   [ ] Schedule A-2 - Investments - schedule attached

   [ ] Schedule B - Real Property - schedule attached

---

5. **Verification**

   MAILING ADDRESS
   1475 East Avenue, Chico, CA 95926

   **EMAIL ADDRESS**
   dholen@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** 1/5/2021

---

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Page 5
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
HOVEY LINDA A

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District

Division, Board, Department, District, if applicable
Board of 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

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other Public School District

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

☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
- or-
The period covered is / / , through December 31, 2020.

☐ Leaving Office: Date Left / / 2020
(Leave one circle.)
- or-
The period covered is / / , through the date of leaving office.

☐ Assuming Office: Date assumed / / 

☐ Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete) ➤ Total number of pages including this cover page: 1

Schedules attached

☐ 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

- or- ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
1163 E. 7th Street Chico CA 95928

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(530 ) 891-3000 linda95926@gmail.com

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 1/31/2021
(month, day, year)

Signature
(File the originally signed paper statement with your filing officer.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER
(LAST) JONES
(FIRST) Scott
(MIDDLE) P.

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District Personnel Commission
Division, Board, Department, District, if applicable
Personnel Commission
Your Position Commissioner
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
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other Public School District

3. Type of Statement (Check at least one box)
☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __/____/____
☐ The period covered is __/____/____, through December 31, 2020.
☐ The period covered is __/____/____, through
☐ Assuming Office: Date assumed __/____/____ and office sought, if different than Part 1:
☐ Candidate: Date of Election __/____/____ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page:
Schedules attached
☐ 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

☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
1143 E. Seventh Street Chico, CA 95928
STREET
(City or Agency Address Recommended - Public Document)
CITY
STATE CA
ZIP CODE 95928
DAYTIME TELEPHONE NUMBER
(530) 281-2339
EMAIL ADDRESS bajan2012@yahoo.com

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 1/9/2021 (month, day, year)
Signature

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dateinitialfilingreceived
Filing Official Use Only
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Page - 5
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) Kaisser
(First) Kathleen
(Middle) Elizabeth

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District Board Vice President
Division, Board, Department, District, if applicable
Your Position
Board

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 Public School District

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left ___/___/______
☐ The period covered is ___/___/______, through December 31, 2020.
☐ The period covered is ___/___/______, through the date of leaving office.
☐ Assuming Office: Date assumed ___/___/______
☐ Date of Election _____________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: ________
Schedules attached
☐ 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
☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
830-891-3000
STREET
CITY CHICO CA 95928
STATE ZIP CODE

DAYTIME TELEPHONE NUMBER
( ) EMAIL ADDRESS
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 Feb 19, 2021 Signature
(month, day, year) (Print the originally signed paper statement with your filing official.)
**SCHEDULE B**

**Interests in Real Property**

*(Including Rental Income)*

<table>
<thead>
<tr>
<th>ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1029 Poppy ST</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chico</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>/20 20</td>
</tr>
<tr>
<td></td>
<td>ACQUIRED DISPOSED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NATURE OF INTEREST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ownership/Deed of Trust</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Leasehold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yrs. remaining Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IF RENTAL PROPERTY, GROSS INCOME RECEIVED</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $499</td>
</tr>
</tbody>
</table>

| $10,001 - $100,000 | OVER $100,000 |

| SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more. |
| None |

---

*You are not required to report loans from a commercial lending institution 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:*

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (Business Address Acceptable)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>BUSINESS ACTIVITY, IF ANY, OF LENDER</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>INTEREST RATE</th>
<th>TERM (Months/Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td>None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HIGHEST BALANCE DURING REPORTING PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
</tr>
</tbody>
</table>

| $10,001 - $100,000 | OVER $100,000 |

<table>
<thead>
<tr>
<th>Guarantor, if applicable</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (Business Address Acceptable)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>BUSINESS ACTIVITY, IF ANY, OF LENDER</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>INTEREST RATE</th>
<th>TERM (Months/Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td>None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HIGHEST BALANCE DURING REPORTING PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
</tr>
</tbody>
</table>

| $10,001 - $100,000 | OVER $100,000 |

<table>
<thead>
<tr>
<th>Guarantor, if applicable</th>
</tr>
</thead>
</table>
**SCHEDULE C**

Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

### 1. INCOME RECEIVED

#### NAME OF SOURCE OF INCOME

*Rush Personnel Services Inc*

**ADDRESS (Business Address Acceptable)**

15 Independence Circle

**BUSINESS ACTIVITY, IF ANY, OF SOURCE**

*Election worker*

**YOUR BUSINESS POSITION**

*Temporary help*

**GROSS INCOME RECEIVED**

- $500 - $1,000
- $10,001 - $100,000
- OVER $100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**

- Salary
- Spouse’s or registered domestic partner’s income
- Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- Sale of _____________________________ (Real property, car, boat, etc.)
- Loan repayment
- Commission or Rental Income, list each source of $10,000 or more

**GROSS INCOME RECEIVED**

- $500 - $1,000
- $1,001 - $10,000
- OVER $100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**

- Salary
- Spouse’s or registered domestic partner’s income
- Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- Sale of _____________________________ (Real property, car, boat, etc.)
- Loan repayment
- Commission or Rental Income, list each source of $10,000 or more

### 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

*You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, 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:*

#### NAME OF LENDER*

__________________________________________

**ADDRESS (Business Address Acceptable)**

__________________________________________

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

__________________________________________

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

#### INTEREST RATE

%  []  None

#### TERM (Months/Years)

__________________________________________

**SECURITY FOR LOAN**

- None
- Personal residence
- Real Property
- Street address
- City
- Guarantor
- Other (Describe)

**Comments:**

__________________________________________

---

FPCC Form 700 - Schedule C (2020/2021)
advice@fpcc.ca.gov * 866-275-3772 * www.fpcc.ca.gov
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STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Kamph Jessica Ann

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Marsh Junior High School
Division, Board, Department, District, if applicable
Chico Unified
Your Position
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
☒ Other Public School District
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ City of

3. Type of Statement (Check at least one box)
☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __/__/_______
☐ The period covered is __/__/_______, through December 31, 2020.
☐ The period covered is __/__/_______, through the date of leaving office.
☐ Assuming Office: Date assumed __/__/_______
☐ Candidate: Date of Election __/__/_______ and office sought, if different than Part 1:

4. Schedule Summary (must complete) Total number of pages including this cover page: ______
Schedules attached
☐ Schedule A-1 - 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
-OR- ☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
2253 Humboldt Rd.
STREET
Chico
CITY
STATE
CA
ZIP CODE
95928

DAYTIME TELEPHONE NUMBER
(530) 895-4109
EMAIL ADDRESS
jkmph@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 02/09/2021
Signature

(Attach any originally signed paper statement with your filing official.)
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink:

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Keene  Krstine  Diane

1. Office, Agency, or Court

Agency Name (Do not use acronyms):
Chico Unified School District  Director, State Federal Programs
Division, Board, Department, District, if applicable
Your Position

- 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
☒ Other  Public School District
☐ County of
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __________________________ (Check one circle)
- or -
The period covered is __________________________, through December 31, 2020.
☐ The period covered is January 1, 2020, through the date of leaving office.
- or -
The period covered is __________________________, through the date of leaving office.

☐ Assuming Office: Date assumed __________________________

☐ Candidate: Date of Election __________________________ and office sought, if different than Part 1:

4. Schedule Summary (must complete)  ▶ Total number of pages including this cover page: ___________

Schedules attached

☐ 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

☐ or ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS  STREET  CITY  STATE  ZIP CODE
1163  East First St.  Chico  CA  95928
(Business or Agency)  Address Recommended - Public Document

DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
(530) 831-3000  ext. 20105  Keene@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  2/9/21  Signature  Krstine Keene
(Month, day, year) (Print the original signed paper statement with your filing official)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Kessler Brandon Kyle

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Administra-
Division, Board, Department, District, if applicable
Your Position

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 Public School District

3. Type of Statement (Check at least one box)
□ Annual: The period covered is January 1, 2020, through December 31, 2020.

- or -
The period covered is __________/________/________, through December 31, 2020.

□ Assuming Office: Date assumed __________/________/________

□ Leaving Office: Date Left __________/________/________

□ The period covered is January 1, 2020, through the date of leaving office.

- or -
The period covered is __________/________/________, through the date of leaving office.

□ Candidate: Date of Election __________/________/________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: __________
Schedules attached
□ 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

- or - X None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS 1418 Scottsdale St Chico CA 95926
(City or Agency Address Recommended - Public Document)
STREET
STATE CA ZIP CODE
95926

DAYTIME TELEPHONE NUMBER (530) 518-7412
EMAIL ADDRESS bkessler@chicoisd.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 2-10-21 (month, day, year)
Signature (Must be legibly signed paper statement with your legal signature)
NAME OF FILER  (LAST)  (FIRST)  (MIDDLE)  
Kistle  Julia  Marie  

1. Office, Agency, or Court
Agency Name  (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Facilities Department
Your Position
Director
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  Public School District

3. Type of Statement  (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left / / (Check one circle.)
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ Assuming Office: Date assumed / / , through December 31, 2020.
☐ The period covered is / / , through the date of leaving office.
☐ Candidate: Date of Election / / and office sought, if different than Part 1:

4. Schedule Summary (must complete)  ➤ Total number of pages including this cover page:  
Schedules attached
☐ 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
- or - ☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS  STREET  CITY  STATE  ZIP CODE
(Or Agency Address Recommended - Public Document)
2455 Carmichael Drive  Chico  CA  95928
DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
(530) 891-3000  JKISTLE@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  Signature  
2/19/2021  (month, day, year)  
(Fire the original signed paper statement with your filing official.)
## SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

### 1. BUSINESS ENTITY OR TRUST

#### A-Line

<table>
<thead>
<tr>
<th>Name</th>
<th>1835 Lazy Trail Drive, Chico, CA 95926</th>
</tr>
</thead>
</table>

Address (Business Address Acceptable): [ ] Trust, go to 2  [x] Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

<table>
<thead>
<tr>
<th>Construction</th>
</tr>
</thead>
<tbody>
<tr>
<td>IF APPLICABLE, LIST DATE:</td>
</tr>
<tr>
<td>$0 - $1,999</td>
</tr>
<tr>
<td>$2,000 - $10,000</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
</tr>
<tr>
<td>Over $1,000,000</td>
</tr>
</tbody>
</table>

ACQUIRED  DISPOSED

<table>
<thead>
<tr>
<th>NATURE OF INVESTMENT</th>
<th>Partnership</th>
<th>Sole Proprietorship</th>
<th>Other</th>
</tr>
</thead>
</table>

YOUR BUSINESS POSITION: [ ] Owner

### 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

| $0 - $499  |
| $500 - $1,000  |
| $1,001 - $10,000  |

<table>
<thead>
<tr>
<th>NATURE OF INCOME OF $10,000 OR MORE (check a separate sheet if necessary):</th>
</tr>
</thead>
<tbody>
<tr>
<td>$10,001 - $100,000</td>
</tr>
<tr>
<td>$500 - $1,000</td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
</tr>
</tbody>
</table>

None or [ ] Names listed below

Durham Unified School District

### 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (check a separate sheet if necessary)

None or [ ] Names listed below

### 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

[ ] INVESTMENT  [ ] REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City of Other Precise Location of Real Property

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td></td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td></td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td></td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
</tr>
</tbody>
</table>

ACQUIRED  DISPOSED

<table>
<thead>
<tr>
<th>NATURE OF INTEREST</th>
<th>Property Ownership/Deed of Trust</th>
<th>Stock</th>
<th>Partnership</th>
</tr>
</thead>
</table>
| Leasehold          | [ ] Check box if additional schedules reporting investments or real property are attached

[ ] Check box if additional schedules reporting investments or real property are attached

Comment:
Koll

David

1. Office, Agency, or Court

Agency Name  (Do not use acronyms)
Chico Unified School District

Division, Board, Department, District, if applicable
District Office

Agency: North Valley Schools Insurance Group

Date Initial Filing Received
Date Initial Filing Received

Executive Director Human Resources

Alternate Board Member

Position: Alternate Board Member

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

☐ State

☐ Multi-County

☐ County of

☐ City of

☐ Other  Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
  -or-

☐ The period covered is __/__/____, through December 31, 2020.

☐ Assuming Office: Date assumed __/__/____

☐ Candidate: Date of Election __/__/____ and office sought, if different than Part 1:

☐ Leasing Office: Date Left __/__/____
  (Check one circle)

☐ The period covered is January 1, 2020, through the date of leaving office.
  -or-

☐ The period covered is __/__/____, through the date of leaving office.

☐ Leaving Office: Date Left __/__/____

4. Schedule Summary (must complete)  ➤ Total number of pages including this cover page: _____

Schedules attached

☐ 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

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
1163 East 7th Street
Chico
CA
95928

STREET
CITY
STATE
ZIP CODE

Bryan Joseph Koll

DNIYETIME TELEPHONE NUMBER
(530) 891-3000

EMAIL ADDRESS
dkoll@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 1-27-2021

Signature

(Place the original signed paper statement with your filing official.)
1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   Chico Unified School District
   Division, Board, Department, District, if applicable
   Your Position
   Business Manager
   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 __________________________
   [x] Other ______________________________

3. Type of Statement (Check at least one box)
   [ ]or-
   The period covered is _______/_____/______, through December 31, 2020.
   [ ] Assuming Office: Date assumed _______/_____/______ and office sought, if different than Part 1:
   [ ] Leaving Office: Date Left _______/_____/______
   [ ] The period covered is January 1, 2020, through the date of leaving office.
   [ ] or-
   The period covered is _______/_____/______, through the date of leaving office.
   [ ] Candidate: Date of Election _______/_____/______

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: _______
   Schedules attached
   [ ] 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
   [x] None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS
   (Business or Agency Address Recommended - Public Document)
   1163 E. Seventh Street
   Chico CA 95928
   DAYTIME TELEPHONE NUMBER
   (530) 891-3000 ext. 20131
   EMAIL ADDRESS
   jkruger@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 01/22/2021
Signature ________________________________
(month, day, year)
(Fill the originally signed paper statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Lando Thomas Michael

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District

Division, Board, Department, District, if applicable

Board of Trustees

Your Position
Member / Clerk

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

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ County of
☐ Statewide Jurisdiction

☐ Multi-County

☐ Other Public School District

☐ City of

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

☒ Annual: The period covered is January 1, 2020, through

☐ Leaving Office: Date Left / / (Check one circle.)

☐ The period covered is January 1, 2020, through the date of
leaving office.

☐ The period covered is / / , through
the date of leaving office.

☐ Assuming Office: Date assumed / / 

☐ Candidate: Date of Election and office sought, if different than Part 1:

☐ Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: ________

Schedules attached

☐ 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

☐ or- ☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
365 E 10th Avenue
Chico, CA 95926

STREET
(Business or Agency Address Recommended - Public Document)

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER
(530) 354-1649

EMAIL ADDRESS
tmilandc@gmail.com

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 19 Feb 2021

(Month, day, year)

Signature

(Fill the originally signed paper statement with your living official.)
# SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

## 1. INCOME RECEIVED

<table>
<thead>
<tr>
<th>NAME OF SOURCE OF INCOME</th>
<th>NAME OF SOURCE OF INCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nord Country School</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (Business Address Acceptable)</th>
<th>ADDRESS (Business Address Acceptable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5554 California Street, Chico, CA</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BUSINESS ACTIVITY, IF ANY, OF SOURCE</th>
<th>BUSINESS ACTIVITY, IF ANY, OF SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>YOUR BUSINESS POSITION</th>
<th>YOUR BUSINESS POSITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher</td>
<td></td>
</tr>
</tbody>
</table>

- **GROSS INCOME RECEIVED**
  - $500 - $1,000
  - $1,001 - $10,000
  - $10,001 - $100,000
  - OVER $100,000

- **CONSIDERATION FOR WHICH INCOME WAS RECEIVED**
  - Salary
  - Spouse's or registered domestic partner's income
  - Partnership (Less than 10% ownership, For 10% or greater use Schedule A-2.)
  - Sale of (Real property, car, boat, etc.)
  - Loan repayment
  - Commission or Rental Income, list each source of $10,000 or more
  - Other (Describe)

## 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, 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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
<th>INTEREST RATE</th>
<th>TERM (Months/Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (Business Address Acceptable)</th>
<th>ADDRESS (Business Address Acceptable)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>BUSINESS ACTIVITY, IF ANY, OF LENDER</th>
<th>BUSINESS ACTIVITY, IF ANY, OF LENDER</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>HIGHEST BALANCE DURING REPORTING PERIOD</th>
<th>HIGHEST BALANCE DURING REPORTING PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
<td>$1,001 - $10,000</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>OVER $100,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Comments:</th>
<th>Comments:</th>
</tr>
</thead>
</table>

---

FPPC Form 700 - Schedule C (2020/2021)
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page - 13
**NAME OF FILER**

[last name] Jay Christopher

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)

Chico Unified School District

Division, Board, Department, District, if applicable

Educational Services

Assistant Superintendent

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

☐ Judge, Retired Judge, Pro Temp Judge, or Court Commissioner (Statewide Jurisdiction)

☐ County of

☒ Other Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.

☐ Leaving Office: Date Left / / (Check one circle.)

☐ The period covered is January 1, 2020, through the date of leaving office.

☐ The period covered is / / , through the date of leaving office.

☐ Assuming Office: Date assumed / / 

☐ Candidate: Date of Election and office sought, if different than Part 1:

**4. Schedule Summary (must complete)**

Total number of pages including this cover page: __________

Schedules attached

☐ 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

☒ None - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS

1163 E. 7th Street

Chico, CA 95928

STREET (Business or Agency Address Recommended - Public Document)

CITY STATE ZIP CODE

(530) 891-3000, ext. 20137

DAYTIME TELEPHONE NUMBER

EMAIL ADDRESS

jmarxant@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 January 5, 2021

Signature (If the original signed paper statement will your key official.)
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

► 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
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ Multi-County
☐ (Statewide Jurisdiction)
☐ City of
☐ County of
☐ Other  Public School District

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

☒ Annual:  The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office:  Date Left _____/_____/______  (Check one circle.)
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ The period covered is _____/_____/______, through the date of leaving office.
☐ Assuming Office:  Date assumed _____/_____/______
☐ Candidate:  Date of Election _____/_____/______ and office sought, if different than Part 1:

4. Schedule Summary  (must complete)  ► Total number of pages including this cover page: 1

Schedules attached

☒ 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

☐ or-  ☒ None  - No reportable interests on any schedule

5. Verification

MAILING ADDRESS  STREET  CITY  STATE  ZIP CODE
2376 North Ave  Chico  CA  95926

DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
(530) 891-3080  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  January 5, 2021  Signature

(Fill the originally signed page statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER
Molina

(NAME, IF APPLICABLE)

(LAST)
Teri

(FIRST)
L

(MIDDLE)

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District

Division, Board, Department, District, if applicable
Nutrition Services

Your Position
Nutrition Supervisor

☐ 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

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

☐ Multi-County

☐ County of

☐ City of

☐ Other Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.

☐ Leaving Office: Date Left

☐ The period covered is January 1, 2020, through the date of

☐ Assuming Office: Date assumed

☐ Leaving office.

☐ The period covered is through

☐ The date of leaving office.

☐ Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete) 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
tmolina@chicousd.org

STREET
chico

CITY

STATE
ca

ZIP CODE
95928

DAYTIME TELEPHONE NUMBER
(530) 966-6121

EMAIL ADDRESS

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
January 6, 2021

(Month, day, year)

Signature

Tari Molina

(Files the originally signed paper statement with your filing officer.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Your Position:
Administrator
(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 Public School District

3. Type of Statement (Check at least one box)
☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ Assuming Office: Date assumed
☐ Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete) Total number of pages including this cover page: 1
Schedules attached
☐ 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

☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
1163 East Seventh Street Chico CA 95928
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
( 530 ) 891-3000 amoll@chicosd.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 1/6/21 Signature
(month, day, year)

FPPC Form 700 - Cover Page (2020/2021)
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Morris John Nelson

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   Chico Unified School District
   Division, Board, Department, District, if applicable
   M&O
   Your Position
   Custodian Supervisor
   ▶ 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
   □ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
     (Statewide Jurisdiction)
   □ County of
   □ Other Public School District

3. Type of Statement (Check at least one box)
   □ Annual: The period covered is January 1, 2020, through December 31, 2020.
   □ Leaving Office: Date Left ______/_____/_______
   □ The period covered is ______/_____/_______, through December 31, 2020.
   □ The period covered is ______/_____/_______, through the date of leaving office.
   □ Assuming Office: Date assumed ______/_____/_______
   □ Candidate: Date of Election ______/_____/_______ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: __________
   Schedules attached
   □ 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
   □ or- □ None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS
   2455 Carmichael Drive
   Chico, Ca 95928
   DAYTIME TELEPHONE NUMBER
   (530) 891 3095
   EMAIL ADDRESS
   jmorris@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 1/5/21

Signature

(FILE THE ORIGINALLY-SIGNED PAPER STATEMENT WITH YOUR FILING OFFICIAL)
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER   (LAST)   (FIRST)   (MIDDLE)
Mulvins        Emily       E

1. Office, Agency, or Court

Agency Name: (Do not use acronyms)
Chico Unified School District

Division, Board, Department, District, if applicable
Your Position
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
☐ County of
☐ Other Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Assuming Office: Date assumed ______/______/_______

☐ Leaving Office: Date Left ______/______/_______
☐ The period covered is January 1, 2020, through the date of leaving office.

☐ The period covered is ______/______/_______ through the date of leaving office.

☐ Candidate: Date of Election and office sought, if different than Part 1;

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page:

Schedules attached
☐ 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

☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
(Business or Agency Address Recommended - Public Document)
1163 E. Seventh St
Chico, CA 95926

STREET

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER
(530) 891-3000

EMAIL ADDRESS
emulvins@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 1/6/2021

Signature

(If the original is signed I want it returned to you)

[Signature]

(If the original is signed by an official)

[Signature]

(Fill in the name and title of the FPPC official signing the statement)

FPPC Form 700 - Cover Page (2020/2021)
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page 5
# STATEMENT OF ECONOMIC INTERESTS
## COVER PAGE

### A PUBLIC DOCUMENT

**NAME OF FILER**

- **LAST:** Olsen
- **FIRST:** Diane
- **MIDDLE:** Louise

### 1. Office, Agency, or Court

- **Agency Name:** Chico Unified School District
- **Division, Board, Department, District, if applicable:**
- **Your Position:** Director, Student Support Services

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
- [x] City of Chico
- [ ] Other Public School District

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

- [ ] -or- The period covered is _______/_______, through December 31, 2020.
- [ ] Assuming Office: Date assumed _______/_______

- [ ] Leaving Office: Date Left _______/_______

- [ ] The period covered is January 1, 2020, through the date of leaving office.
- [ ] -or- The period covered is _______/_______, through the date of leaving office.

- [ ] Candidate: Date of Election and office sought, if different than Part 1: _______/_______

### 4. Schedule Summary (must complete) ► Total number of pages including this cover page:

- [ ] 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

- [x] None - No reportable interests on any schedule

### 5. Verification

- **MAILING ADDRESS**
- **STREET**
- **CITY**
- **STATE**
- **ZIP CODE**

1163 E 7th Street

**STREET**

**CITY**

**STATE**

**ZIP CODE**

**EMAIL ADDRESS**

dolsen@chicousd.org

**DAYTIME TELEPHONE NUMBER**

(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 true and correct.

**Date Signed** 01/07/2021

**Signature**

(Please sign original copy of statement with your filing official)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER  [LAST]  [FIRST]  [MIDDLE]
Ontiveros Richard Robert

1. Office, Agency, or Court
   Agency Name  (Do not use acronyms)
   Chico Unified School District
   Division, Board, Department, District, if applicable
   Transportation
   If filing for multiple positions, list below or on an attachment.  (Do not use acronyms)
   Transportation Supervisor
   Agency:
   Position:

2. Jurisdiction of Office  (Check at least one box)
   State
   Multi-County
   City of
   Judge, Retired Judge, Pro Temp Judge, or Court Commissioner
   (Statewide Jurisdiction)
   County of
   Other Public School District

3. Type of Statement  (Check at least one box)
   ★ Annual:  The period covered is January 1, 2020, through December 31, 2020.
   *or*  The period covered is / / , through December 31, 2020.
   Leaving Office:  Date Left / / (Check one circle.)
   *or*  The period covered is January 1, 2020, through the date of leaving office.
   The period covered is / / , through the date of leaving office.
   Assuming Office:  Date assumed / / 
   Candidate:  Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete)  ★ Total number of pages including this cover page:  1
   Schedules attached
   ★ 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
   *or*  ★ None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS  STREET  CITY  STATE  ZIP CODE
   (Business or Agency Address Recommended - Public Document)
   10155 Orchard Way  Live Oak  Ca.  95953
   DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
   (530) 216-9355  bontiveros@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  2/10/21  Signature
   (month, day, year)  [File the originally signed paper statement with your filing official.]

FPPC Form 700 - Cover Page (2020/2021)
advice@fppc.ca.gov  866-275-5772  www.fppc.ca.gov
Page - 5
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER  (LAST)        (FIRST)        (MIDDLE)  
Pasillas        Sara        M

1. Office, Agency, or Court
Agency Name  (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Chico High School
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
[ ] County of
[ ] Other  Public School District

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

[ ] Annual: The period covered is January 1, 2020, through December 31, 2020.
[ ] Leaving Office: Date Left __________________________
[ ] The period covered is January 1, 2020, through the date of leaving office.
[ ] The period covered is __________________________
[ ] The period covered is __________________________
[ ] Assuming Office: Date assumed __________________________
[ ] The period covered is __________________________
[ ] Other: __________________________
[ ] The period covered is __________________________

[ ] Candidate: Date of Election __________________________ and office sought, if different than Part 1:

4. Schedule Summary (must complete)  
Total number of pages including this cover page: _________
Schedules attached

[ ] 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

[ ] None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS  STREET  CITY  STATE  ZIP CODE
14 Hillsboro  Chico  CA  95926

DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
(530 ) 518-6096  spasillas@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  2/11/21
(month, day, year)  Signature

[File the originally signed paper statement with your filing official.]

FFPC Form 700 - Cover Page (2020/2021)
advice@ffpc.ca.gov • 866-275-3772 • www.ffpc.ca.gov
Page - 5
SCHEDULE B
Interests in Real Property
(Including Rental Income)

**ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS**
100 Tait St.

**CITY**
Gerber, CA 96035

**FAIR MARKET VALUE**

<table>
<thead>
<tr>
<th>Value Range</th>
<th>Date Acquired</th>
<th>Date Disposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>/20</td>
<td>/20</td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NATURE OF INTEREST**
- Ownership/Deed of Trust
- Easement
- Leasehold
  - Yes, remaining
  - Other

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

<table>
<thead>
<tr>
<th>Income Range</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $499</td>
<td></td>
<td></td>
</tr>
<tr>
<td>$500 - $1,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Over $100,000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SOURCES OF RENTAL INCOME**
If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

- None

---

**NAME OF LENDER**

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**

<table>
<thead>
<tr>
<th>Rate</th>
<th>TERM (Months/Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.25</td>
<td>20 year fixed</td>
</tr>
</tbody>
</table>

**HIGHEST BALANCE DURING REPORTING PERIOD**

<table>
<thead>
<tr>
<th>Balance Range</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
<td></td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
<td></td>
</tr>
<tr>
<td>Over $100,000</td>
<td></td>
</tr>
</tbody>
</table>

**Guarantor, if applicable**

---

You are not required to report loans from a commercial lending institution 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:

**NAME OF LENDER**

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**

<table>
<thead>
<tr>
<th>Rate</th>
<th>TERM (Months/Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>20 year fixed</td>
</tr>
</tbody>
</table>

**HIGHEST BALANCE DURING REPORTING PERIOD**

<table>
<thead>
<tr>
<th>Balance Range</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
<td></td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
<td></td>
</tr>
<tr>
<td>Over $100,000</td>
<td></td>
</tr>
</tbody>
</table>

**Guarantor, if applicable**

---
SCHEDULE B
Interests in Real Property
( Including Rental Income)

ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS
139 West Lassen #25

CITY
Chico, CA 95973

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☒ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:

ACQUIRED DISPOSED

/20 /20

NATURE OF INTEREST
☐ Ownership/Deed of Trust
☐ Easement
☐ Leasehold
☐ Other

Yrs. remaining

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☒ $10,001 - $100,000
☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

☐ None

Justin Downey

ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

ACQUIRED DISPOSED

/20 /20

NATURE OF INTEREST

☐ Ownership/Deed of Trust
☐ Easement
☐ Leasehold
☐ Other

Yrs. remaining

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☒ $10,001 - $100,000
☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

☐ None

* You are not required to report loans from a commercial lending institution 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:

NAME OF LENDER

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

☐ % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000
☐ Guarantor, if applicable

NAME OF LENDER

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

☐ % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000
☐ Guarantor, if applicable

Comments:
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

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

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
CHICO UNIFIED SCHOOL
Division, Board, Department, District, if applicable
PERSONNEL COMMISSION
Your Position
COMMISSIONER
► 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 ____________________________
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ County of ____________________________
☐ Other Public School District
(Statewide Jurisdiction)

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
- or -
The period covered is __/__/____, through December 31, 2020.
☐ Leaving Office: Date Left ____________________________
(Check one circle.)
☐ The period covered is January 1, 2020, through the date of leaving office.
- or -
The period covered is __/__/____, through the date of leaving office.
☐ Assuring Office: Date assumed ____________________________
☐ Candidate: Date of Election ____________________________ and office sought, if different than Part 1:

☐ Candidate: Date of Election ____________________________

☐Schedule Summary (must complete) ► Total number of pages including this cover page: 4

- 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
☐ None - No reportable interests on any schedule

☐ Schedule Summary (must complete) ► Total number of pages including this cover page: 4

☐ 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
☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
1163 E 7TH ST
CHICO, CA 95928

DAYTIME TELEPHONE NUMBER
(530) 891-3000
EMAIL ADDRESS
beverly.patrick7@gmail.com

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 1/15/2021 (month, day, year) Signature (File the original signed paper statement with your filing official)
SCHEDULE B
Interests in Real Property
(Including Rental Income)

**ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS**

**I SPRINGBROOK CT**

**CITY**

CHICO

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**IF APPLICABLE, LIST DATE:**

/ /20 ACQUIRED / /20 DISPOSED

**NATURE OF INTEREST**

☒ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

☐ Other

☐ Yrs. remaining

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

- $0 - $499
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

**SOURCES OF RENTAL INCOME:** If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

☐ None

Ị JESSIE NEFF

**ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS**

**781 HUMBOLDT RD**

**CITY**

CHICO

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**IF APPLICABLE, LIST DATE:**

/ /20 ACQUIRED / /20 DISPOSED

**NATURE OF INTEREST**

☒ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

☐ Other

☐ Yrs. remaining

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

- $0 - $499
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- OVER $100,000

**SOURCES OF RENTAL INCOME:** If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

☒ None

* You are not required to report loans from a commercial lending institution 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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
</tr>
<tr>
<td>INTEREST RATE</td>
</tr>
<tr>
<td>% % None</td>
</tr>
<tr>
<td>HIGHEST BALANCE DURING REPORTING PERIOD</td>
</tr>
<tr>
<td>$500 - $1,000 $1,001 - $10,000</td>
</tr>
<tr>
<td>$10,001 - $100,000 OVER $100,000</td>
</tr>
<tr>
<td>☒ Guarantor, if applicable</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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</thead>
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</tr>
<tr>
<td>INTEREST RATE</td>
</tr>
<tr>
<td>% % None</td>
</tr>
<tr>
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</tr>
<tr>
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</tr>
<tr>
<td>$10,001 - $100,000 OVER $100,000</td>
</tr>
<tr>
<td>☒ Guarantor, if applicable</td>
</tr>
</tbody>
</table>

Comments:
**SCHEDULE B**

**Interests in Real Property**
(Including Rental Income)

### ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
- **417 Hickory**
  - **City:** Chico
- **1720-1722 Sherman Ave**
  - **City:** Chico

#### Fair Market Value
- **$10,001 - $100,000**
- **Over $1,000,000**

#### If applicable, list date
- **Acquired:** 1/20
- **Disposed:** 1/20

#### Nature of Interest
- **Ownership/Deed of Trust**
- **Leasehold**
  - Years remaining: __________ [None]
- **Easement**
- **Other**

#### If rental property, gross income received
- **$0 - $499**
- **$500 - $1,000**
- **$1,001 - $10,000**
- **Over $100,000**

#### Sources of rental income
- If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
- **None**

### Notes:

*You are not required to report loans from a commercial lending institution 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:*

#### Name of Lender*

**ADDRESS (Business Address Acceptable)**

**Business activity, if any, of lender**

**Interest rate**
- **%**
- **None**

**Term (Months/Years)**

**Highest balance during reporting period**
- **$500 - $1,000**
- **$1,001 - $10,000**
- **$10,001 - $100,000**
- **Over $100,000**
- **Guarantor, if applicable**

**Comments:**

---

**Name:** Patrick V. Bevley
**SCHEDULE B**

**Interests in Real Property**

**Including Rental Income**

<table>
<thead>
<tr>
<th>ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1519 HEMLOCK ST</td>
</tr>
<tr>
<td>CITY</td>
</tr>
<tr>
<td>CHICO</td>
</tr>
</tbody>
</table>

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**IF APPLICABLE, LIST DATE:**

- /20 ACQUIRED
- /20 DISPOSED

**NATURE OF INTEREST**

- Ownership/Deed of Trust
- Easement
- Leasehold
- Yrs. remaining
- Other

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**

- $0 - $499
- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- Over $100,000

**SOURCES OF RENTAL INCOME:**

- If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
- None

---

*You are not required to report loans from a commercial lending institution 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:*

<table>
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<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
</tr>
<tr>
<td>INTEREST RATE</td>
</tr>
<tr>
<td>%</td>
</tr>
</tbody>
</table>

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- Over $100,000

**Guarantor, if applicable**

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
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<tr>
<td>ADDRESS (Business Address Acceptable)</td>
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<tr>
<td>%</td>
</tr>
</tbody>
</table>

**HIGHEST BALANCE DURING REPORTING PERIOD**

- $500 - $1,000
- $1,001 - $10,000
- $10,001 - $100,000
- Over $100,000

**Guarantor, if applicable**

**Comments:**
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink:

NAME OF FILER
(LAST) Payne
(FIRST) Shanon
(MIDDLE) Joell

1. Office, Agency, or Court

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

☐ County of

☐ City of

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)

☐ Other Public School District

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

☐ Annual: The period covered is January 1, 2020, through December 31, 2020.

☐ Leaving Office: Date Left __/__/________ (Check one circle.)

☐ The period covered is January 1, 2020, through the date of leaving office.

☐ The period covered is __/__/________, through the date of leaving office.

☐ Assuming Office: Date assumed __/__/2020

☐ Candidate: Date of Election ____________ and office sought, if different than Part 1:

4. Schedule Summary (must complete)  Total number of pages including this cover page: __________

Schedules attached

☐ 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

☐ or- ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
(1350 Citrus Ave., Chico, CA 95926)

STREET

CITY

STATE

ZIP CODE

(930) 891-3107

EMAIL ADDRESS
spayne@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 1/7/2021

I have attached the original signed page statement with this filing officials.

Signature

(Fill in if filed at the same time of the filing officials.)
**NAME OF FILER**

LAST: Peyton

FIRST: Jeana

MIDDLE: Lea

---

1. **Office, Agency, or Court**

   Agency Name: (Do not use acronyms)

   Division, Board, Department, District, if applicable

   Your Position

   ▶ 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
   - [X] Other - Public School District

---

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

   □ Annual: The period covered is January 1, 2020, through December 31, 2020.

   - [ ] The period covered is _______/_____/_______, through December 31, 2020.

   □ Leaving Office: Date Left: _______/_____/_______

   (Check one circle.)

   □ The period covered is January 1, 2020, through the date of leaving office.

   - [ ] The period covered is _______/_____/_______, through the date of leaving office.

   □ Assuming Office: Date assumed: _______/_____/_______

   □ Candidate: Date of Election: _______/_____/_______ and office sought, if different than Part 1:

---

4. **Schedule Summary (must complete) ▶ Total number of pages including this cover page: ________

   Schedules attached

   □ 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

   - [ ] None - No reportable interests on any schedule

---

5. **Verification**

   MAILING ADDRESS: 368 Picholine Way, Chico, Ca 95928

   STREET: Chico

   CITY: Ca

   STATE: 95928

   ZIP CODE:

   DAYTIME TELEPHONE NUMBER: (530) 521-1598

   EMAIL ADDRESS: jpeyton@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 therein 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: 02/22/2021

   (Month, day, year)

   Signature: [Signature]

   [For the originally signed paper statement with your filing official]
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER
(LAST) (FIRST) (MIDDLE)
Robinson Eileen L

1. Office, Agency, or Court

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

Board member
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
☐ County of
☐ City of
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
☐ County of
☐ Other
Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __________
☐ The period covered is __________, through
☐ The period covered is __________, through
☐ Assuming Office: Date assumed __________
☐ Candidate: Date of Election __________ and office sought, if different than Part 1;

4. Schedule Summary (must complete) ➤ Total number of pages including this cover page: one

Schedules attached

☐ 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

☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
(Business or Agency Address Recommended - Public Document)
1163 E 7th Street
Chico Ca 95928

DAYTIME TELEPHONE NUMBER
(530) 891-3000

EMAIL ADDRESS
erobinson@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 January 19, 2021

S Robinson

(Firmly print or type name of signer and date in the space provided)

FPPC Form 700 - Cover Page (2020/2021)
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page - 5
NAME OF FILER (LAST) (FIRST) (MIDDLE)
Rodgers Kimberly Jeanne

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Sierra View Elementary
Your Position
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
☐ County of
☐ Other Public School District

3. Type of Statement (Check at least one box)
☒ Annual: The period covered is January 1, 2020, through
☐ The period covered is / / , through
☐ The period covered is / / , through
the date of leaving office.
Leaving Office: Date Left / / (Check one circle.)
☐ The period covered is January 1, 2020, through the date of
leaving office.
Assuming Office: Date assumed / / and office sought, if different than Part 1:

4. Schedule Summary (must complete)  Total number of pages including this cover page: ______
Schedules attached
☐ 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

☐ or- ☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
(Street or Agency Address Recommended - Public Document)
1598 Hooker Oak Avenue
CITY
Chico
CA 95928
STATE ZIP CODE
(930) 891-3117
ADDRESS EMAIL ADDRESS
krogers@chico.usd.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 January 20, 2021
(month, day, year)
Signature

FPPC Form 700 - Cover Page (2020/2021)
divce@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page - 5
NAME OF FILER (LAST) SAWBER  
(FIRST) AARON  
(MIDDLE) THAYER  

1. Office, Agency, or Court  
Agency Name (Do not use acronyms) CHICO USD  
Your Position ADMINISTRATOR  

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 Public School District  

3. Type of Statement (Check at least one box)  
Annual: The period covered is January 1, 2020, through December 31, 2020.  
Leaving Office: Data Left  
The period covered is __/__/____, through December 31, 2020.  
The period covered is __/__/____, through the date of leaving office.  
Assuming Office: Date assumed __/__/____  
Candidate: Date assumed __/__/____ and office sought, if different than Part 1:  

4. Schedule Summary (must complete) → Total number of pages including this cover page: 1  
Schedules attached  
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  

→ None - No reportable interests on any schedule  

5. Verification  
1560 Manzanita St. Chico CA 95926  
MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
DAYTIME TELEPHONE NUMBER: (530) 879-7400  
EMAIL ADDRESS: a.sawber@chicosd.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 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 1/20/2021  
Signature AARON SAWBER  
(Files the originally signed paper statement with your filing official)  

**STATEMENT OF ECONOMIC INTERESTS**

**COVER PAGE**

**A PUBLIC DOCUMENT**

---

**NAME OF FILER**

<table>
<thead>
<tr>
<th>LAST</th>
<th>FIRST</th>
<th>MIDDLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Schrock</td>
<td>Kristen</td>
<td>Joelle</td>
</tr>
</tbody>
</table>

---

**1. Office, Agency, or Court**

**Agency Name** (Do not use acronyms)

Chico Unified School District

**Division, Board, Department, District, if applicable**

Little Chico Creek

**Your Position**

Administrator

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

---

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

- [ ] State
- [ ] Multi-County
- [ ] City of
- [X] Other

**Public School District**

---

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

- [ ] Annual: The period covered is January 1, 2020, through December 31, 2020.
- [ ] Leaving Office: Date Left / / 

- [ ] The period covered is / / , through December 31, 2020.
- [ ] The period covered is / / , through the date of leaving office.

- [ ] Assuming Office: Date assumed / / 

- [ ] Candidate: Date of Election and office sought, if different than Part 1:

---

**4. Schedule Summary (must complete)**

- Total number of pages including this cover page: ________

**Schedules attached**

- [ ] Schedule A-1 - Investments – schedule attached
- [X] 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

- [ ] None - No reportable interests on any schedule

---

**5. Verification**

**MAILING ADDRESS**

2090 Amanda Way

**CITY**

**STATE**

**ZIP CODE**

Chico

CA

95928

**DAYTIME TELEPHONE NUMBER**

(530) 891-3297

**EMAIL ADDRESS**

kschrock@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

<table>
<thead>
<tr>
<th>Signature</th>
</tr>
</thead>
</table>

(month, day, year)
### SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

#### 1. BUSINESS ENTITY OR TRUST

**Name**
North Rim Adventure Sports

**Address (Business Address Acceptable)**
1768 E. 2nd St.

**Check one**
- [ ] Trust, go to 2
- [ ] Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**
Bike Shop

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0 - $1,999</td>
<td>/20 ACQUIRED DISPOSED</td>
</tr>
<tr>
<td>$2,000 - $10,000</td>
<td>/20 ACQUIRED DISPOSED</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>/20 ACQUIRED DISPOSED</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td>/20 ACQUIRED DISPOSED</td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td>DISPOSED</td>
</tr>
</tbody>
</table>

**NATURE OF INVESTMENT**
- [ ] Partnership
- [ ] Sole Proprietorship
- [ ] Other

**YOUR BUSINESS POSITION**
owner

#### 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

| $0 - $499       | $10,001 - $100,000 |
| $500 - $1,000   | OVER $100,000      |
| $1,001 - $10,000| OVER $100,000      |

#### 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE

- [ ] None or [ ] Names listed below

#### 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

**Check one box:**
- [ ] INVESTMENT
- [ ] REAL PROPERTY

**Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property**

**Description of Business Activity or City or Other Precise Location of Real Property**

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td>/20 ACQUIRED DISPOSED</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>/20 ACQUIRED DISPOSED</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td>/20 ACQUIRED DISPOSED</td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td>DISPOSED</td>
</tr>
</tbody>
</table>

**NATURE OF INTEREST**
- [ ] Property Ownership/Deed of Trust
- [ ] Stock
- [ ] Partnership
- [ ] Leasehold
- [ ] Other

**Yrs. remaining**

**Check box if additional schedules reporting investments or real property are attached**

**Comments:**

---

**CALIFORNIA FORM 700**
FAIR POLITICAL PRACTICES COMMISSION

Name:

**FAIR MARKET VALUE**

| $0 - $1,999       | /20 ACQUIRED DISPOSED |
| $2,000 - $10,000  | /20 ACQUIRED DISPOSED |
| $10,001 - $100,000| /20 ACQUIRED DISPOSED |
| $100,001 - $1,000,000| /20 ACQUIRED DISPOSED |
| Over $1,000,000   | DISPOSED               |

**NATURE OF INTEREST**

<table>
<thead>
<tr>
<th>Property Ownership/Deed of Trust</th>
<th>Stock</th>
<th>Partnership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leasehold</td>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

**Comments:**

---

FPPC Form 700 - Schedule A-2 (2020/2021)
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
Page - 9
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Shepherd John Raymond

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Your Position
Educational Services
Dir. of Sec. 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
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
☐ County of
☒ Other Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ or-
The period covered is / / , through December 31, 2020.
☐ Assuming Office: Date assumed / / 
☐ Candidate: Date of Election / / and office sought, if different than Part 1:
☐ Leaving Office: Date Left / / 
☐ or-
The period covered is January 1, 2020, through the date of leaving office.
☐ or-
The period covered is / / , through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 0

Schedules attached
☐ 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

☐ or- ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
(Street or Agency Address Recommended - Public Document)
1163 E. 7th St.
Chico

STREET
City
CA
ZIP CODE

CITY
STATE
95928

DAYTIME TELEPHONE NUMBER
(530) 774-5429

EMAIL ADDRESS
jshepherd@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 1/5/21

(month, day, year)

Signature

(Date the original form of this statement with your filing official.)
1. Office, Agency, or Court

Agency Name (Do not use acronyms)
CHICO UNIFIED SCHOOL DISTRICT
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
☐ County of ____________________________
☐ City of ____________________________
☐ Other Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left ______/______/______
☐ The period covered is ______/______/______, through December 31, 2020.
☐ The period covered is ______/______/______, through the date of leaving office.
☐ Assuming Office: Date assumed ______/______/______
☐ The period covered is ______/______/______, through the date of leaving office.

☐ Candidate: Date of Election ____________________________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: _______

Schedules attached

☐ 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

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
901 ESPLANADE
CHICO
CA
95926

STREET
(City or Agency Address Recommended - Public Document)
STATE
ZIP CODE

DAYTIME TELEPHONE NUMBER
(530) 891-3026
EMAIL ADDRESS
ESHERIDA@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 2/8/2021
(month, day, year)

Signature
(Place the original, signed paper statement with your filing officer.)
# SCHEDULE B
Interests in Real Property
(Including Rental Income)

### ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
779 VICTORIAN PARK DRIVE

**CITY**
CHICO

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td>/ 20 12/1/20 ACQUIRED DISPOSED</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>/ 20 / 20 ACQUIRED DISPOSED</td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
</tr>
</tbody>
</table>

**NATURE OF INTEREST**
- [x] Ownership/Deed of Trust
- [ ] Easement
- [ ] Leasehold

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**
- [x] $0 - $499
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000

**SOURCES OF RENTAL INCOME**: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
- [ ] None

---

* You are not required to report loans from a commercial lending institution 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:

### NAME OF LENDER*

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**
- [ ] %
- [ ] None

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000
- [ ] Guarantor, if applicable

### NAME OF LENDER*

**ADDRESS (Business Address Acceptable)**

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

**INTEREST RATE**
- [ ] %
- [ ] None

**TERM (Months/Years)**

**HIGHEST BALANCE DURING REPORTING PERIOD**
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000
- [ ] Guarantor, if applicable

Comments:
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER

(LAST) Spaggiari

(FIRST) Renee

(MIDDLE) Camille

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Pleasant Valley High School

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

Your Position
Administration

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

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
   (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☐ City of

☐ Other Public School District

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

☐ Annual: The period covered is January 1, 2020, through December 31, 2020.

☐ Leaving Office: Date Left __/__/______
   (Check one circle.)

☐ The period covered is January 1, 2020, through the date of leaving office.

☐ Assuming Office: Date assumed __/__/______

☐ The period covered is __/__/______, through the date of leaving office.

☐ Candidate: Date of Election __/__/______ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: ______

Schedules attached

☐ 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

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS

1475 East Ave

STREET

Chico

(City or Agency Address Recommended - Public Document)

STATE

CA

ZIP CODE

95926

DAYTIME TELEPHONE NUMBER

(530) 891-3050 x 31165

EMAIL ADDRESS

rspaggiari@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 11/5/21 (month, day, year)

Signature RSpaggiari

(File the original signed statement with your filing official)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink:

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Staley Kelly Jan

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District

Division, Board, Department, District, if applicable
District Office

Your Position
Superintendent

▶ 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 ___________________________

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
  (Statewide Jurisdiction)

☐ County of ___________________________

☒ Other Public School District

3. Type of Statement (Check at least one box)
☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
  -or-
  The period covered is __________/________/________, through December 31, 2020.

☐ Leaving Office: Date Left ______/_______/_______
  (Check one circle.)

☐ The period covered is January 1, 2020, through the date of leaving office.
  -or-
  The period covered is __________/________/________, through the date of leaving office.

☐ Assuming Office: Date assumed ______/_______/_______

☐ Candidate: Date of Election ______/_______/_______ and office sought, if different than Part 1.

4. Schedule Summary (must complete)  ▶ Total number of pages including this cover page: 2
Schedules attached
☐ 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

-OR-  ☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS ___________________________
(Business or Agency Address Recommended - Public Document)
1163 East 7th Street  Chico  CA  95928

STREET ___________________________
CITY ___________________________
STATE ___________________________
ZIP CODE ___________________________

DAYTIME TELEPHONE NUMBER _________ EMAIL ADDRESS ___________________________
(530) 891-3000 x 20134  kstaley@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 February 10, 2021
(month, day, year)  Signature ___________________________
(Fill the originally signed paper statement with your filing official.)
**SCHEDULE C**
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

### 1. INCOME RECEIVED

<table>
<thead>
<tr>
<th>NAME OF SOURCE OF INCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tri Counties Bank</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (Business Address Acceptable)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>63 Constitution Drive, Chico, CA 95973</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BUSINESS ACTIVITY, IF ANY, OF SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Husband's Employment (Appraiser)</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>YOUR BUSINESS POSITION</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>GROSS INCOME RECEIVED</th>
</tr>
</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
</tr>
<tr>
<td>OVER $100,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary</td>
</tr>
<tr>
<td>Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sale of (Real property, car, boat, etc.)</td>
</tr>
<tr>
<td>Loan repayment</td>
</tr>
<tr>
<td>Commission or Rental Income, list each source of $10,000 or more</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other (Describe)</th>
</tr>
</thead>
</table>

### 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, 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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>dfsdf</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (Business Address Acceptable)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>dfsdf F</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BUSINESS ACTIVITY, IF ANY, OF LENDER</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>HIGHEST BALANCE DURING REPORTING PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
</tr>
<tr>
<td>OVER $100,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INTEREST RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>%</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TERM (Months/Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>None</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SECURITY FOR LOAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Real Property</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>dfsdfasdfsdsf</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street address</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>FSDFDFSDF</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Guarantor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>fsdafsdf</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>(Describe)</th>
</tr>
</thead>
</table>

Comments: **fDFDSFSDF**
NAME OF FILER (LAST)  (FIRST)  (MIDDLE)
Starkey    Marjie

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
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
☐ Judge, Retired Judge, Pro Temp Judge, or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other Public School District

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __/__/______ (Check one circle.)
- or-
The period covered is __/__/______, through December 31, 2020.
The period covered is __/__/______, through the date of leaving office.
☐ Assuming Office: Date assumed __/__/______
- or-
The period covered is __/__/______, through the date of leaving office.
☐ Candidate: Date of Election ______________ and office sought, if different than Part 1:

4. Schedule Summary (must complete)  ► Total number of pages including this cover page: 1
Schedules attached
☐ 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
- or-  ☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
2446 Marigold Avenue
Chico, CA 95926
STREET
CITY
STATE
ZIP CODE

DAILY TELEPHONE NUMBER (530) 891-3121
EMAIL ADDRESS mstarkey@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 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 01-06-2021
Signature

(For the original signed paper statement with your signed name)

FPCC Form 700 - Cover Page (2020/2021)  advice@fppc.ca.gov  866-275-3772  www.fppc.ca.gov
Page - 5
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST)  (FIRST)  (MIDDLE)
Steinbach  Kellie  Ann Iverson

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   Chico Unified School District
   Division, Board, Department, District, if applicable
   Your Position
   Principal Neal Dow
   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 Public School District

3. Type of Statement (Check at least one box)
   □ Annual: The period covered is January 1, 2020, through December 31, 2020.
     -or-
     The period covered is ______/____/_______, through December 31, 2020.
   □ Leaving Office: Date Left ______/____/_______
     (Check one circle.)
     □ The period covered is January 1, 2020, through the date of leaving office.
     -or-
     The period covered is ______/____/_______, through the date of leaving office.
   □ Assuming Office: Date assumed ______/____/_______
   □ Candidate: Date of Election ______/____/_______ and office sought, if different than Part 1:

4. Schedule Summary (must complete)  ▶ Total number of pages including this cover page: ______
   Schedules attached
   □ 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
   -or- □ None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS  STREET  CITY  STATE  ZIP CODE
   192 E. 3rd Street  Chico  CA  95928
   DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
   (530) 321-2001  ksteinbach@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 2/23/2021  Signature
   (month, day, year)  (Print or type your signature, in ink, lower right corner)

FPPC Form 700 - Cover Page (2020/2021)
advocacy@fppc.ca.gov  •  866-275-3773  •  www.fppc.ca.gov
Page 5
### SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

#### 1. BUSINESS ENTITY OR TRUST

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christian Michaels, California Pasta Productions, Hudson</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (Business Address Acceptable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>192 E. 3rd Street</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Check one</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Trust, go to 2</td>
</tr>
<tr>
<td>☑ Business Entity, complete the box, then go to 2</td>
</tr>
</tbody>
</table>

#### GENERAL DESCRIPTION OF THIS BUSINESS

**Restaurants**

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td>/ 20 DISPOSED</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>/ 20 DISPOSED</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td>/ 20 DISPOSED</td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NATURE OF INVESTMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Partnership</td>
</tr>
<tr>
<td>☑ Sole Proprietorship</td>
</tr>
<tr>
<td>☐ Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>YOUR BUSINESS POSITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-Owner</td>
</tr>
</tbody>
</table>

#### 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<table>
<thead>
<tr>
<th>$0 - $499</th>
</tr>
</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
</tr>
</tbody>
</table>

| $10,001 - $100,000 |
| OVER $100,000 |

#### 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary)

| None |
| Names listed below |

#### 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

<table>
<thead>
<tr>
<th>Check one box:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ INVESTMENT</td>
</tr>
<tr>
<td>☑ REAL PROPERTY</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Business Entity, if Investment, or Assessor’s Parcel Number or Street Address of Real Property</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of Business Activity or City or Other Precise Location of Real Property</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td>/ 20 DISPOSED</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>/ 20 DISPOSED</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td>/ 20 DISPOSED</td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NATURE OF INTEREST</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Property Ownership/Deed of Trust</td>
</tr>
<tr>
<td>☐ Stock</td>
</tr>
<tr>
<td>☐ Partnership</td>
</tr>
<tr>
<td>☐ Leasehold</td>
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<table>
<thead>
<tr>
<th>Yrs. remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

| ☐ Check box if additional schedules reporting investments or real property are attached |

Comments:

---

**Calif Form 700 - Schedule A-2 (2020/2021)**

advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov
SCHEDULE B
Interests in Real Property
(Including Rental Income)

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
437 Paseo Companeros

CITY
Chico

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☒ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
/ /20 / /20

ACQUIRED
DISPOSED

NATURE OF INTEREST
☒ Ownership/Deed of Trust
☐ Easement

☐ Leasehold
☐ Yrs. remaining
☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☒ $10,001 - $100,000
☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
☐ None

Glenda Boman

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
/ /20 / /20

ACQUIRED
DISPOSED

NATURE OF INTEREST
☐ Ownership/Deed of Trust
☐ Easement

☐ Leasehold
☐ Yrs. remaining
☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
☐ None

* You are not required to report loans from a commercial lending institution 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:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

☐ None

☐ %

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

☐ Guarantor, if applicable

Comments:

FPPC Form 700 - Schedule B (2020/2021)
advice@fppc.ca.gov • 866-275-3372 • www.fppc.ca.gov
Page - 11
1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Parkview Elementary
Your Position
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
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
☐ Multi-County __________________________
☐ County of __________________________
☐ City of __________________________
☒ Other Public School District ______

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left ______/______/______
☐ The period covered is ______/______/______, through December 31, 2020.
☐ The period covered is ______/______/______, through the date of leaving office.
☐ Assuming Office: Date assumed ______/______/______
☐ The period covered is ______/______/______, through the date of leaving office.

☐ Candidate: Date of Election ________________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: __________

Schedules attached
☐ Schedule A-1 - Investments – schedule attached
☐ Schedule D - Income – Gifts – Travel Payments – schedule attached
☐ Schedule A-2 - Investments – schedule attached
☐ Schedule E - Income, Loans, & Business Positions – schedule attached
☐ Schedule B - Real Property – schedule attached
☐ Schedule C - Income, Loans, & Business Positions – schedule attached

☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
1770 E. 8th Street
Chico, Ca 95928

STREET
City
State
ZIP CODE
(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER
(530) 891-3114
EMAIL ADDRESS
hsuwentes@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: FEB. 8th, 2021
Signature: [Signature]

(Files the originally signed paper statement with your filing official.)
1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Educational Services
Director
Your Position
Agency: ____________________________
Position: ____________________________

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

☐ State
☐ Multi-County
☐ City of
☐ County of
☐ Other

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __/__/_______
☐ The period covered is __/__/_______ through December 31, 2020.
☐ The period covered is __/__/_______ through the date of leaving office.
☐ Assuming Office: Date assumed __/__/_______
☐ Candidate: Date of Election __/__/_______ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _______

Schedules attached
☐ 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

☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS: 1163 E. 7th Street, Chico, CA 95928
STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
DAYTIME TELEPHONE NUMBER: (530) 891-3000, ext. 20137
EMAIL ADDRESS: tsullivan@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: January 5, 2021
Signature: ____________________________
(Fourth day, year) (Put the original, signed paper statement with your filing official.)
NAME OF FILER: Matthew Tennis David

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   Chico Unified School District
   Division, Board, Department, District, if applicable
   Board of Trustees
   Your Position
   Trustee
   If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
   Agency: Butte County Water Commission
   Position: Member

2. Jurisdiction of Office (Check at least one box)
   [ ] State
   [ ] Multi-County
   [X] City of Butte
   [X] Other Public School District

3. Type of Statement (Check at least one box)
   -or-
   The period covered is 01 / 01 / 2020 through December 31, 2020.
   [X] Leaving Office: Date Left __/__/ 2020
   [ ] The period covered is January 1, 2020, through the date of leaving office.
   -or-
   The period covered is__/__/__/__/ through the date of leaving office.
   [ ] Candidate: Date of Election __/__/ and office sought, if different than Part 1:

4. Schedule Summary (must complete) Total number of pages including this cover page: ________
   Schedules attached
   [ ] Schedule A-1 - Investments - schedule attached
   [X] Schedule A-2 - Investments - schedule attached
   [X] Schedule B - Real Property - schedule attached
   [X] Schedule C - Income, Loans, & Business Positions - schedule attached
   [ ] Schedule D - Income - Gifts - schedule attached
   [ ] Schedule E - Income - Gifts - Travel Payments - schedule attached
   -or- [ ] None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS: 1171 Woodland Ave Chico CA 95928
   STREET
   CITY
   STATE
   ZIP CODE
   DAYTIME TELEPHONE NUMBER: (916) 316-3388
   EMAIL ADDRESS: mattennis@yahoo.com

   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 02/16/2021
   Signature
<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
<th>GENERAL DESCRIPTION OF THIS BUSINESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Southwest Airlines</td>
<td></td>
</tr>
</tbody>
</table>

**Airline**

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>$2,000 - $10,000</th>
<th>$10,001 - $100,000</th>
<th>Over $1,000,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>NATURE OF INVESTMENT</td>
<td>Stock</td>
<td>Other</td>
<td>(Describe)</td>
</tr>
<tr>
<td>Partnership</td>
<td>Income Received of $0 - $499</td>
<td>Income Received of $500 or More (Report on Schedule C)</td>
<td></td>
</tr>
</tbody>
</table>

IF APPLICABLE, LIST DATE:

05/21/20 ACQUIRED DISPOSED

---

**Name:** Matthew Tenis

FPPC Form 700 – Schedule A-1 (2020/2021)  
advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov  
Page - 7
**SCHEDULE A-2**  
Investments, Income, and Assets of Business Entities/Trusts  
(Ownership Interest is 10% or Greater)

<table>
<thead>
<tr>
<th>1. BUSINESS ENTITY OR TRUST</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tendoor Farming Partnership</strong></td>
</tr>
<tr>
<td><strong>Name</strong> PO Box 1202, Durham, CA 95938</td>
</tr>
<tr>
<td><strong>Address</strong> (Business Address Acceptable)</td>
</tr>
</tbody>
</table>
| Check one  
- Trust, go to 2  
- Business Entity, complete the box, then go to 2 |

<table>
<thead>
<tr>
<th>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</th>
</tr>
</thead>
</table>
| $0 - $499  
$500 - $1,000  
$1,001 - $10,000 |

<table>
<thead>
<tr>
<th>3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)</th>
</tr>
</thead>
</table>
| Names listed below  
Associated Rice Marketing Co-Op (ARMCO), Farm Service Agency USDA, Tendoor Group, Pinnacle Rice |

<table>
<thead>
<tr>
<th>4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST</th>
</tr>
</thead>
</table>
| Check one box:  
- INVESTMENT  
- REAL PROPERTY |

<table>
<thead>
<tr>
<th>Rice Inventory</th>
</tr>
</thead>
</table>
| **Name of Business Entity, if Investment, or Assessor’s Parcel Number or Street Address of Real Property**  
7595 Aguas Frias Rd, Durham, CA |
| **Description of Business Activity or City or Other Precise Location of Real Property** |
| **FAIR MARKET VALUE**  
$2,000 - $10,000  
$10,001 - $100,000  
$100,001 - $1,000,000  
Over $1,000,000 |
| Check box if additional schedules reporting investments or real property are attached |

<table>
<thead>
<tr>
<th>5. BUSINESS ENTITY OR TRUST</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Wild Ink Press</strong></td>
</tr>
<tr>
<td><strong>Name</strong> 183 E. 6th St., Chico, CA 95928</td>
</tr>
<tr>
<td><strong>Address</strong> (Business Address Acceptable)</td>
</tr>
</tbody>
</table>
| Check one  
- Trust, go to 2  
- Business Entity, complete the box, then go to 2 |

<table>
<thead>
<tr>
<th>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</th>
</tr>
</thead>
</table>
| $0 - $499  
$500 - $1,000  
$1,001 - $10,000 |

<table>
<thead>
<tr>
<th>3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)</th>
</tr>
</thead>
</table>
| Names listed below  
Paper Source, Faire Wholesale Inc. |

<table>
<thead>
<tr>
<th>4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST</th>
</tr>
</thead>
</table>
| Check one box:  
- INVESTMENT  
- REAL PROPERTY |

<table>
<thead>
<tr>
<th>Stationery Design-Manufacturing</th>
</tr>
</thead>
</table>
| **Name of Business Entity, if Investment, or Assessor’s Parcel Number or Street Address of Real Property**  
183 E. 6th St., Chico CA 95928 |
| **Description of Business Activity or City or Other Precise Location of Real Property** |
| **FAIR MARKET VALUE**  
$2,000 - $10,000  
$10,001 - $100,000  
$100,001 - $1,000,000  
Over $1,000,000 |
| Check box if additional schedules reporting investments or real property are attached |

**Comments:**
**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

<table>
<thead>
<tr>
<th>ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>7595 Aguas Frias Rd.</td>
</tr>
<tr>
<td>CITY</td>
</tr>
<tr>
<td>Durham, CA</td>
</tr>
<tr>
<td>FAIR MARKET VALUE</td>
</tr>
<tr>
<td>$2,000 - $10,000</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
</tr>
<tr>
<td>Over $1,000,000</td>
</tr>
<tr>
<td>IF APPLICABLE, LIST DATE:</td>
</tr>
<tr>
<td>01/01/20</td>
</tr>
<tr>
<td>ACQUIRED</td>
</tr>
<tr>
<td>DISPOSED</td>
</tr>
<tr>
<td>NATURE OF INTEREST</td>
</tr>
<tr>
<td>Ownership/Deed of Trust</td>
</tr>
<tr>
<td>Easement</td>
</tr>
<tr>
<td>Leasehold</td>
</tr>
<tr>
<td>Yrs. remaining</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>IF RENTAL PROPERTY, GROSS INCOME RECEIVED</td>
</tr>
<tr>
<td>$0 - $499</td>
</tr>
<tr>
<td>$500 - $1,000</td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
</tr>
<tr>
<td>OVER $100,000</td>
</tr>
<tr>
<td>SOURCES OF RENTAL INCOME:</td>
</tr>
<tr>
<td>If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.</td>
</tr>
<tr>
<td>None</td>
</tr>
<tr>
<td>Tendoor Farming Partnership</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ASSESSOR’S PARCEL NUMBER OR STREET ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>183 E. 6th St.</td>
</tr>
<tr>
<td>CITY</td>
</tr>
<tr>
<td>Chico, CA</td>
</tr>
<tr>
<td>FAIR MARKET VALUE</td>
</tr>
<tr>
<td>$2,000 - $10,000</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
</tr>
<tr>
<td>Over $1,000,000</td>
</tr>
<tr>
<td>IF APPLICABLE, LIST DATE:</td>
</tr>
<tr>
<td>/20</td>
</tr>
<tr>
<td>ACQUIRED</td>
</tr>
<tr>
<td>DISPOSED</td>
</tr>
<tr>
<td>NATURE OF INTEREST</td>
</tr>
<tr>
<td>Ownership/Deed of Trust</td>
</tr>
<tr>
<td>Easement</td>
</tr>
<tr>
<td>Leasehold</td>
</tr>
<tr>
<td>Yrs. remaining</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>IF RENTAL PROPERTY, GROSS INCOME RECEIVED</td>
</tr>
<tr>
<td>$0 - $499</td>
</tr>
<tr>
<td>$500 - $1,000</td>
</tr>
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</tr>
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<tr>
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</tr>
<tr>
<td>SOURCES OF RENTAL INCOME:</td>
</tr>
<tr>
<td>If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.</td>
</tr>
<tr>
<td>None</td>
</tr>
<tr>
<td>Mid-Valley Title Co.</td>
</tr>
<tr>
<td>601 Main St., Chico, CA 95928</td>
</tr>
</tbody>
</table>

* You are not required to report loans from a commercial lending institution 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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mid-Valley Title Co.</td>
</tr>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
</tr>
<tr>
<td>601 Main St., Chico CA 95928</td>
</tr>
<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF LENDER</td>
</tr>
<tr>
<td>Title and Escrow</td>
</tr>
<tr>
<td>INTEREST RATE</td>
</tr>
<tr>
<td>4%</td>
</tr>
<tr>
<td>HIGHEST BALANCE DURING REPORTING PERIOD</td>
</tr>
<tr>
<td>$500 - $1,000</td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
</tr>
<tr>
<td>Guarantor, if applicable</td>
</tr>
</tbody>
</table>

Comments:
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Vincent John Everd

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Information Services
Your Position
Director
► 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 Public School District
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

3. Type of Statement (Check at least one box)
☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ The period covered is _____/____/_______, through December 31, 2020.
☐ Leaving Office: Date Left _____/____/_______
(Check one circle.)
☐ The period covered is January 1, 2020, through the date of leaving office.
☐ The period covered is _____/____/_______, through the date of leaving office.
☐ Candidate: Date of Election _____/____/_______ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: _______
Schedules attached
☐ 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
- or - ☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
(1163 East Seventh Street Chico CA 95928)
(Business or Agency Address Recommended - Public Document)
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(530) 891-3000 jvincent@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 1/7/21 Signature ____________________________
(month, day, year)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

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

1. Office, Agency, or Court
Agency Name  (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
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
[ ] Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)
[ ] County of
[ ] Mult-County
[ ] County of
[ ] City of
[ ] Other  Public School District

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

[ ] Annual: The period covered is January 1, 2020, through December 31, 2020.
[ ] Leaving Office: Date Left / / (Check one circle.)
[ ] The period covered is / / , through December 31, 2020.
[ ] The period covered is / / , through the date of leaving office.
[ ] Assuming Office: Date assumed / / 
[ ] Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete)  Total number of pages including this cover page: ________
Schedules attached

[ ] 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

-or-  [ ] None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS  STREET  CITY  STATE  ZIP CODE
(Business or Agency Address Recommended - Public Document)
1163 E 7th Street  Chico  CA  95928

DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
(530) 891-3000  cweaver@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 01/05/2021
Signature Christopher Weaver

Digital signature by Christopher Weaver
gate: 2021.01.05 16:11:27 -0800

(File the originally signed paper statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Whittaker Damon Andrew

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Your Position
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 ________________________________
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
☐ County of ________________________________
☒ Other Public School District

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

☒ Annual: The period covered is January 1, 2020, through December 31, 2020.
- or - The period covered is _______ / _______/ _______ through December 31, 2020.

☐ Leaving Office: Date Left _______ / _______/ _______
(Check one circle.)
- or - The period covered is January 1, 2020, through the date of leaving office.

☐ Assuming Office: Date assumed _______ / _______/ _______
- or - The period covered is _______ / _______/ _______ through the date of leaving office.

☐ Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (must complete) ► Total number of pages including this cover page: __________

Schedules attached

☐ 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

- or - ☒ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(1475 East Ave Chico Ca 95926)
(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(530) 891-3050 dwhittaker@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 1/9/21
(month, day, year)

Signature ______________________
(Files the originally signed paper statement with your filing official.)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Williams Douglas James

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
Chico Unified School District
Division, Board, Department, District, if applicable
Chico High School
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
☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other Public School District

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2020, through December 31, 2020.
☐ Leaving Office: Date Left __/__/____
☐ or-
☐ The period covered is __/__/____, through December 31, 2020.
☐ The period covered is __/__/____, through the date of leaving office.
☐ Assuming Office: Date assumed __/__/____
☐ or-
☐ Date of Election __/__/____ and office sought, if different than Part 1;

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: 

Schedules attached
☐ 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

☐ or- ☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
901 The Esplanade Chico CA 95973
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(530) 891-3027 dwilliams@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 01/14/2021 Signature
(month, day, year)