CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
BRINSON JANET L

1. Office, Agency, or Court
Agency Name
CHICO UNIFIED SCHOOL DISTRICT DIRECTOR
Division, Board, Department, District, if applicable
Your Position

► If filing for multiple positions, list below or on an attachment.
Agency: Position:

2. Jurisdiction of Office (Check at least one box)
☐ State
☐ Multi-County
☐ City of
☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ County of
☐ Other _PUBLIC SCHOOL DISTRICT_

3. Type of Statement (Check at least one box)
☐ Leaving Office: Date Left __/__/_____
( Check one)
☐ The period covered is January 1, 2012, through the date of leaving office.
☐ Assuming Office: Date assumed __/__/_____
☐ The period covered is __/__/_____, through the date of leaving office.
☐ Candidate: Election year __________ and office sought, if different than Part 1: __________

4. Schedule Summary
Check applicable schedules or "None."
☐ Schedule A-1 - Investments - schedule attached
☐ Schedule A-2 - Investments - schedule attached
☐ Schedule B - Real Property - schedule attached
☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

► Total number of pages including this cover page: ________
☐ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS
1163 EAST 7TH STREET CHICO, CA 95928
(Business or Agency Address Recommended - Public Document)

STREET CITY STATE ZIP CODE

DAYTIME TELEPHONE NUMBER
(530) 891-3000 EXT 105
E-MAIL ADDRESS (OPTIONAL)

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 3/14/13
(month, day, year) Signature __________________________

(File the originally signed statement with your filing officer.)

FPPC Form 700 (2012/2013)
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov