

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

Leaving Office: Date Left ____

the date of leaving office.

STATE

CA

leaving office.

(Check one circle.)

The period covered is January 1, 2022, through the date of

__/____, through



NAME OF FILER (LAST) (FIRST) (MIDDLE) **Bristow** Joseph 1. Office, Agency, or Court Agency Name (Do not use acronyms) Winters Cemetery District Division, Board, Department, District, if applicable Your Position **Board** Chairperson ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: __ 2. Jurisdiction of Office (Check at least one box) Judge, Retired Judge, Pro Tem Judge, or Court Commissioner State (Statewide Jurisdiction) Multi-County Yolo and Solano County of Other City of

	Candidate: Date of Election	and office sought, if different than Part 1:
,	Schedule Summary (required) Schedules attached	Total number of pages including this cover page: _ONE (()
	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	

CITY

P.O. Box 402 Winters **DAYTIME TELEPHONE NUMBER EMAIL ADDRESS**

(530) 795-2475

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 01-19-2023

MAILING ADDRESS

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

December 31, 2022.

December 31, 2022.

Annual: The period covered is January 1, 2022, through

Assuming Office: Date assumed _____/___

STREET

(Business or Agency Address Recommended - Public Document)

The period covered is ______, through

Signature

ZIP CODE

95694



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Red	ceived
JAN 2 0 202	2

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	31.00
Bozarth	Timothy		
1. Office, Agency, or Court			-
Agency Name (Do not use acronyn	ns)		
Winters Cemetery District			
Division, Board, Department, District	, if applicable	Your Position	
Board		Vice-chair	
▶ If filing for multiple positions, list	below or on an attachment. (Do not us	ee acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Che	ck at least one box)		
State	-	Judge, Retired Judge, Pro Tem Ju (Statewide Jurisdiction)	dge, or Court Commissioner
Multi-County Yolo and Sola	no	County of	
City of		C - 4	
3. Type of Statement (Check	at least one box)		
Annual: The period covered is December 31, 2022.	January 1, 2022, through	Leaving Office: Date Left(Check one	
The period covered is December 31, 2022.	s/, through	☐ The period covered is Januar leaving office.	y 1, 2022, through the date of
Assuming Office: Date assum	ned/	~ .	/, through
Candidate: Date of Election _	and office sought	i, if different than Part 1:	
4. Schedule Summary (requ Schedules attached	ired) ► Total number	of pages including this cover pa	ge:/
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	
Schedule B - Real Property	- schedule attached	Schedule E - Income - Gifts - Travel Pa	yments – schedule attached
-or- X None - No reportable	interests on any schedule	·	
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended)	- Public Document)	STATE	ZIP CODE
P.O. Box 402	Winter	rs CA	95694
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(530) 795-2475			
	in preparing this statement. I have revieus is true and complete. I acknowledge	ewed this statement and to the best of my kn this is a public document.	owledge the information contained
I certify under penalty of perjury	under the laws of the State of Califor	nia that the foregoing is true and correct	1 1
Date Signed SAU 19		Signature (File the originally signed paper sta	ement with your filing official.)
(manny a)	The state of the s		



STATEMENT OF ECONOMIC INTERESTS COVER PAGE



A PUBLIC DOCUMENT

Plε	ease type or print in ink.				BY:
NA	ME OF FILER (LAST)	(FIRST)		(MIDDLE)	
Jl	USTUS	LARRY		W.	
1.	Office, Agency, or Court				
	Agency Name (Do not use acronyms,				
	WINTERS CEMETERY DIST	RICT			
	Division, Board, Department, District, i	applicable	Your Position	ı	
	BOARD		TRUSTEE	E	
	▶ If filing for multiple positions, list be	low or on an attachment. (Do no	t use acronyms)		
	Agency:		Position:		
<u> </u>	Jurisdiction of Office (Check	c at least one box)			
	State	•	Judge, Retir	red Judge, Pro Tem Judge	e, or Court Commissioner
			(Statewide J	-	
	Multi-County YOLO AND SO	LANO	County of		
	City of				
3	Type of Statement (Check at				
٠.	Annual: The period covered is J		Leaving C	Office: Date Left/_	1
	December 31, 2022.	andary 1, 2022, unough	Leaving 0	(Check one cit	
	-or- The period covered is _	/, through			, 2022, through the date of
	December 31, 2022.	,	leaving	office.	
	Assuming Office: Date assume	d/		eriod covered is te of leaving office.	, through
	Candidate: Date of Election	and office so	ught, if different than Part	: 1:	
4.	Schedule Summary (requir	ed) ► Total num	ber of pages includ	ling this cover page	:
	Schedules attached				*******
	Schedule A-1 - Investments -	schedule attached	Schedule C - Incom	me, Loans, & Business P	ositions - schedule attached
	Schedule A-2 - Investments -	schedule attached	Schedule D - Incom	me - Gifts - schedule att	ached
	Schedule B - Real Property -	schedule attached	Schedule E - Incom	me – Gifts – Travel Paym	nents - schedule attached
<u>, </u>		nterests on any schedule			
5.	. Verification				
	MAILING ADDRESS STREET (Business or Agency Address Recommended - I	CITY Public Document)	'	STATE	ZIP CODE
	P.O. BOX 402	WII	NTERS	CA	95694
	DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
	(530) 795-2475			1. 0 1	
	I have used all reasonable diligence in herein and in any attached schedules				ledge the information contained
	I certify under penalty of perjury un	nder the laws of the State of Ca	lifornia that the foregoin	ng is true and correct.	1 /
	Date Signed May	2023	Signature 70	MULL.C	MOMS



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

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Dr	c)	0 2	129	

Please type or print in ink.

NA	ME OF FILER (LAST)	(FIRST)		(MID	DLE)	a de
Ki	lkenny	Dennis				
1.	Office, Agency, or 0	Court				
	Agency Name (Do not use	e acronyms)				
	Winters Cemetery D	istrict				
	Division, Board, Departmen	t, District, if applicable		Your Position		
	Board			Trustee		
	► If filing for multiple posit	ions, list below or on an attachment	(Do not use acror	yms)		
	Agency:			Position:		
2.	Jurisdiction of Offi	Ce (Check at least one box)				
	State	,		Judge, Retired Judge, Pro (Statewide Jurisdiction)	Tem Judg	e, or Court Commissioner
	Multi-County Yolo an	d Solano		County of		
	City of			7 04		
 3.	Type of Statement	(Check at least one box)				
	December 3	covered is January 1, 2022, through 1, 2022.	L	Leaving Office: Date Le	eft	
	-or- The period o December 3	covered is/	, through	☐ The period covered is leaving office.	January 1	, 2022, through the date of
	Assuming Office: Da	ate assumed/		The period covered is the date of leaving of		/, through
	Candidate: Date of E	Election and	office sought, if diffe	rent than Part 1:		
4.	Schedule Summary	/ (required) ► Tota	al number of pa	ges including this cov	er page	:
	Schedules attache	ed				
	Schedule A-1 - Inv	restments – schedule attached	Sche	dule C - Income, Loans, & E	Business P	Positions - schedule attached
		restments - schedule attached	Sche	dule D - Income - Gifts - so	chedule att	ached
	Schedule B - Real	Property - schedule attached	Sche	dule E - Income – Gifts – Ti	ravel Paym	nents - schedule attached
-(or- 🔀 None - No rep	oortable interests on any sche	dule			
5.	Verification					
	MAILING ADDRESS (Business or Agency Address Red	STREET commended - Public Document)	CITY	STATI	E	ZIP CODE
	P.O. Box 402	,	Winters	CA		95694
	DAYTIME TELEPHONE NUMBER		EMAIL	ADDRESS		
	(530) 795-2475					
		diligence in preparing this statement. I schedules is true and complete. I			ot my know	rieage the information contained
	I certify under penalty of	perjury under the laws of the Sta	te of California tha	the foregoing is true and	correct.	
	Date Signed	/36/23 (month, day, year)	Signatu		Section of paper statement	ent with your filing official.)



STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

0	te Init	tial Fi	ling Re	eceived
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m		. C	2023	JUI/

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	2/
Hague	Viona			
1. Office, Agency, or Cour	t			
Agency Name (Do not use acro	nyms)			
Winters Cemetery Distric	t			
Division, Board, Department, Dist	trict, if applicable	Your Position	n	
Board		Trustee		
▶ If filing for multiple positions,	list below or on an attachment. (Do n	not use acronyms)		
Agency:		Position: —		
2. Jurisdiction of Office	Check at least one box)			
State	,		tired Judge, Pro Tem Jud Jurisdiction)	ge, or Court Commissioner
Multi-County Yolo and So	olano	County of		
City of				
3. Type of Statement (Che	ck at least one box)			
December 31, 202	d is January 1, 2022, through 22.	Leaving	Office: Date Left(Check one	
-or- The period covere December 31, 202	d is/, through		period covered is January ng office.	1, 2022, through the date of
Assuming Office: Date as	sumed/		period covered is/_ate of leaving office.	, through
Candidate: Date of Electio	n and office so	ought, if different than Pa	rt 1:	
4. Schedule Summary (re	quired) ► Total nun	nber of pages inclu	ding this cover pag	e:
Schedules attached		, 0		
Schedule A-1 - Investme	ente — echadula attachad	Schedule C - Inc	ome. Loans. & Business	Positions – schedule attached
Schedule A-2 - Investme			come – Gifts – schedule a	
Schedule B - Real Prope		Schedule E - Inc	ome – Gifts – Travel Pay	ments - schedule attached
- N				
	ble interests on any schedule			
5. Verification MAILING ADDRESS STR	EET CIT	rv	STATE	ZIP CODE
MAILING ADDRESS STR (Business or Agency Address Recommen		I ¥	SIAIE	ZIF CODE
P.O. Box 402	Wi	inters	CA	95694
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
(530) 795-2475	nce in preparing this statement. I have	ravioused this statement	and to the hest of my kno	wledge the information contained
	dules is true and complete. I acknowled			wiedge the information contained
I certify under penalty of perju	ary under the laws of the State of Ca	alifornia that the forego	ing is true and correct.	
Date Signed Feb. 6	2 2023 ith, day, year)	Signature	LONA HA	Aut Enfect with your filing official.)



STATEMENT OF ECONOMIC INTERESTS COVER PAGE



A PUBLIC DOCUMENT

Please type or print in ink.			BI:
IAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
Carbahal	Sheila	L	
. Office, Agency, or Court			
Agency Name (Do not use acronyms) Winters Cemetery District			
Division, Board, Department, District, if	applicable	Your Position	
Administration		District Manager	
▶ If filing for multiple positions, list beli	ow or on an attachment. (Do not u	se acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Check	at least one box)		
State		Judge, Retired Judge, Pro Tem Juge, (Statewide Jurisdiction)	udge, or Court Commissioner
Multi-County Yolo and Solano		County of	
City of		Other	
3. Type of Statement (Check at I	east one box)		
Annual: The period covered is Ja December 31, 2022.	nuary 1, 2022, through	Leaving Office: Date Left (Check one	
The period covered is December 31, 2022.	, through	The period covered is Janua leaving office.	ry 1, 2022, through the date of
Assuming Office: Date assumed			, through
Candidate: Date of Election	and office sough	nt, if different than Part 1:	
I. Schedule Summary (require	ad) Total number	er of pages including this cover pa	.ma: 3
Schedules attached	Total number	n or pages melaumy this cover pa	ge
Schedule A-1 - Investments -	schedule attached	Schedule C - Income, Loans, & Busines	
Schedule A-2 - Investments -		Schedule D - Income - Gifts - schedule	
Schedule B - Real Property -	schedule attached	Schedule E - Income - Gifts - Travel Pa	ayments – schedule attached
-or- None - No reportable in	terests on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pr	city chic Document)	STATE	ZIP CODE
P.O. Box 402	Winte	ers CA	95694
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(530) 795-2475		Sheila@winterscemetery.org	
I have used all reasonable diligence in herein and in any attached schedules		riewed this statement and to the best of my knie this is a public document.	nowledge the information contained
I certify under penalty of perjury un	der the laws of the State of Califo	ornia that the foregoing is true and correc	t)
Date Signed 3/10/20	23	Signature (File the originally signed paper ste	atement with your filing official.)

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Shella Cauto kal

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 315 Peach Place CITY Winters
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 Leasehold Yrs. remaining Other IF RENTAL PROPERTY, GROSS INCOME RECEIVED \$0 - \$499 \$500 - \$1,000 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 Caitlyn & Cameron Rodriguez
I lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
NAME OF LENDER*
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years) %

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION Sheilalarbakal

ALUE IF APPLICABLE, LIST DATE:
000
000
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0,000
000,000 ACQUIRED DISPOSED
00
EREST
ed of Trust Easement
Yrs. remaining Other
PERTY, GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000
0,000 OVER \$100,000
ENTAL INCOME: If you own a 10% or greater name of each tenant that is a single source of 100 or more.
a manda in the landor's regular course of
n made in the lender's regular course of
our official status. Personal loans and
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our official status. Personal loans and
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-



STATEMENT OF ECONOMIC INTERESTS COVER PAGE NOV 1



Ple	ease type or print in ink			RY.		
NA	ME OF FILER (LAST)	(FIRST)		(MIDDLE)		
V	elasquez	Mark				
1.	Office, Agency, or	Court				
	Agency Name (Do not	use acronyms)				
	Winters Cemetery	District				
	Division, Board, Departm	nent, District, if applicable		Your Position		
				General Counsel		
	► If filing for multiple po	If filing for multiple positions, list below or on an attachment. (Do not use acronyms)				
	Agency:			Position:		
2.	Jurisdiction of O	ffice (Check at least one box)				
	State	,		Judge, Retired Judge, Pro Tem Judge, or Court Commissioner		
	Lungual -			(Statewide Jurisdiction)		
	Multi-County			County of		
	a; .			X Other Yolo County And Solano SC		
_					_	
3. Type of Statement (Check at least one box)						
		d covered is January 1, 2021, through 31, 2021.		★ Leaving Office: Date Left 10 / 28 / 2022 (Check one circle.)		
	The period	d covered is/	, through	The period covered is January 1, 2021, through the date of leaving officeor-	f	
	Assuming Office:	Date assumed//		The period covered is 01 / 01 / 2022 , through the date of leaving office.	1	
	Candidate: Date o	f Election and	office sought,	if different than Part 1:		
4	Calcadula Communication			The same was a speciment as a second		
4.	Schedules attac		al number	of pages including this cover page:2		
	Schedule A-1 -	Investments – schedule attached	×	Schedule C - Income, Loans, & Business Positions - schedule attached	d	
	Schedule A-2 - Investments – schedule attached			Schedule D - Income - Gifts - schedule attached		
	Schedule B - Re	eal Property - 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)	STREET Recommended - Public Document)	CITY	STATE ZIP CODE		
	500 Capitol Mall,		Sacrar			
	DAYTIME TELEPHONE NUMBER			EMAIL ADDRESS		
(916) 325-4000 mark.velasquez@bbklaw.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 herein and in any attached schedules is true and complete. I acknowledge this is a public document.				ined	
	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.					
	Date Signed	10 18 3022 month, day, year)	Si	ignature Mul Velocytics (File the originally signed paper statement with your filing official.)	=======================================	

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION			
Name			
Mark Velasquez			

NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
	NAME OF SOUNCE OF INCOME
Best Best & Krieger LLP ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
500 Capitol Mall, Suite 1700, Sacramento, CA 95814	ADDITESS (Busiliess Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm	BUSINESS ACTIVITY, IF ANY, OF SOUNCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Of Counsel	TOOK BOSINESS FOSITION
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$ OVER \$100,000	\$1,001 - \$10,000 \$1,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary	CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other	Other
(Describe)	(Describe)
a retail installment or credit card transaction, made in th	lending institution, or any indebtedness created as part of e lender's regular course of business on terms available status. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	%
ADDRESS (Business Address Acceptable)	OFFILIPITY FOR LOAD
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	-
	f inv
<u>\$1,001 - \$10,000</u>	City
\$1,001 - \$10,000 \$10,001 - \$100,000	Guarantor
\$10,001 - \$100,000	Guarantor
	·
\$10,001 - \$100,000	Guarantor