

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
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COVER PAGE

A PUBLIC DOCUMENT

1/20/20 SC

Please type or print in ink.	APUBL	IC DOCUMENT
NAME OF FILER (LAST)	(FIRST)	, (MIDDLE)
Kilkenn-1	Denvis	
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		r
Division, Board, Department, District, if applicable	1-1 Distric	et Trustee
Division, Board, Department, District, if applicable	/ 3/3/1	Your Position
▶ If filing for multiple positions, list below or on an at	tachment. (Do not use a	icronyms)
		4
Agency: City of Winter-	Park	Position: Cum 1 + tee Mainberg
2. Jurisdiction of Office (Check at least one b		
State		☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County Yolo/Solano		County of
City of		Other
Gity of		
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2019, December 31, 2019.	through	Leaving Office: Date Left//(Check one circle.)
The period covered is/	, through	 The period covered is January 1, 2019, through the date of leaving office. -or-
Assuming Office: Date assumed	1	The period covered is/, through the date of leaving office.
Candidate: Date of Election	and office sought if	different than Part 1:
Candidate. Date of Election		
4. Schedule Summary (must complete)	► Total number of	f pages including this cover page:
Schedules attached		
Schedule A-1 - Investments - schedule attach	ed S	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments – schedule attach	ed 🗆 S	Schedule D - Income - Gifts - schedule attached
☐ Schedule B - Real Property – schedule attach	_ ^	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- V None - No reportable interests on all	ny schedule	
5. Verification		
MAILING ADDRESS STREET	CITY	STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)	Love MA	951.94
DAYTIME TELEPHONE NUMBER	1605 (61.	MAIL ADDRESS
(530) 795-2475		wed 415@Spealobal. Net
I have used all reasonable diligence in preparing this st herein and in any attached schedules is true and com	atement. I have reviewed	d this statement and to the best of my knowledge the information contain
I certify under penalty of perjury under the laws of		
, ,		1/1/
Date Signed	Sign	ature 2
" (month, day, year)		(File the originally signed paper statement with your filing official.)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

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Date Initial Filing Received
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2/3/2050

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A PUBLIC DOCUMENT

NAME OF FILER	(LAST)	(FIRST)			(MIDDLE)
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1. Office,	Agency, or Court				
	ame (Do not use acronyms)				
	ITERS CEMETERY	DISTRICT			
	oard, Department, District, if applicable	~/	Your Position	UT MILA	IP.
_00	PARD OF TRUSTED	-5	<i>V /</i>	CE CHAI	//
► If filing	for multiple positions, list below or on an a	ttachment. (Do not use	acronyms)		
Agency: _			_ Position:		
2. Jurisdi	ction of Office (Check at least one	box)			
State	,		☐ Judge, Retired (Statewide Juri	-	dge, or Court Commissioner
Multi-C	ounty Yold Solano		County of		
— City of	. ('		☐ Other		
	f Statement (Check at least one box)			D	1 1
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	December 31, 2019.	,og.	-or- leaving of	fice.	
Assul	ming Office: Date assumed/	J	O The perio		, through
☐ Candi	date: Date of Election	and office sought,	if different than Part 1:		
4 Schedu	le Summary (must complete)	► Total number	of pages including	a this cover pag	re:/
	iles attached	P Total Hallison	or pages moraum;	<i>y </i>	· · · · · · · · · · · · · · · · · · ·
			Schedule C - Income	Loans, & Business	Positions – schedule attached
	hedule A-1 - Investments – schedule attac hedule A-2 - Investments – schedule attac		Schedule D - Income		
	hedule B - Real Property – schedule attac	_	Schedule E - Income	 Gifts – Travel Pay 	ments - schedule attached
_					
-or- ⊠ N	lone - No reportable interests on a	ny schedule			
5. Verificat	tion				
MAILING AD	DRESS STREET Agency Address Recommended - Public Document)	CITY		STATE	ZIP CODE
Po	BOX 402	WINTE	RS	CA	95694
DAYTIME TE	LEPHONE NUMBER		EMAIL ADDRESS	150 - ha	alobal.net
(330	795-2475	A-tA I besse ession	4	Con Time (1977)	
herein and	d all reasonable diligence in preparing this s in any attached schedules is true and con	nplete. I acknowledge t	his is a public documer	nt.	wieuge (he information contained
I certify u	nder penalty of perjury under the laws o	f the State of Californ	ia that the foregoing i	s true and correct.	$> \cdot / $
Data Class	ed_02-03-2020	Q;	gnature	(6, 1)	TO TY
Date Sign	(month, day, year)	31		originally signed paper state	ment with your filing official.)
			1 1/		



STATEMENT OF ECONOMIC INTERESTS

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A PUBLIC DOCUMENT

1/28/2050

Ple	ase type or print in ink. A PUE	BLIC DOCUMENT
NAM	E OF FILER (LAST) (FIRST)	(MIDDLE)
_	Justus Larry	W
1.	Office, Agency, or Court	
	Agency Name (Do not use acronyms)	
	Winters Cemetery &	District
	Division, Board, Department, District, if applicable	Your Position
	Doard	Irustee
	▶ If filing for multiple positions, list below or on an attachment. (Do not us	e 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 Yolo/Solano	County of
	City of	Other
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/(Check one circle.)
	The period covered is/, through December 31, 2019.	 The period covered is January 1, 2019, through the date of leaving office. -or-
l	Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.
I	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	or pages moraling the 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
-0	- None - No reportable interests on any schedule	
	/erification	
	MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
_	415 Cemetery DR. Wint	ers CA 95697
(530) 795-2475	WCd415@Sbcglobal.Net
	have used all reasonable diligence in preparing this statement. I have review erein and in any attached schedules is true and complete. I acknowledge to	ved this statement and to the best of my knowledge the information contained this is a public document.
ı	certify under penalty of perjury under the laws of the State of Californ	ia that the foregoing is true and correct.
[Date Signed 1-28-30 Signed	gnatute Party Whisless
	(month, day, year)	(File the grid nally signed paper statement with your filing official.)

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION

Schedule A-1 - Investments - schedule attached

Schedule A-2 - Investments - schedule attached

Schedule B - Real Property - schedule attached

STATEMENT OF ECONOMIC INTERESTS

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Date Initial Filing Received

aliala050

A PUBLIC DOCUMENT Please type or print in ink. (MIDDLE) (FIRST) NAME OF FILER (LAST) 1. Office, Agency, or Court Agency Name (Do not use acronyms) WINTERS Division, Board, Department, District, if applicable ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Position: _ Agency: ___ 2. Jurisdiction of Office (Check at least one box) ☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner ☐ State (Statewide Jurisdiction) Multi-County 40/0- SOLANO County of _____ 3. Type of Statement (Check at least one box) Leaving Office: Date Left ____/_ Annual: The period covered is January 1, 2019, through (Check one circle.) December 31, 2019. -OF-O The period covered is January 1, 2019, through the date of The period covered is ______, through leaving office. December 31, 2019. O The period covered is ____ Assuming Office: Date assumed ____/_ the date of leaving office. ___ and office sought, if different than Part 1: ___ Candidate: Date of Election ___ 4. Schedule Summary (must complete) ► Total number of pages including this cover page: ___ Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached

-or- None - No reportable interests on any schedule			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	et. WINTES	STATE	95694 ZIP CODE
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS		
(530)795-1440			
I have used all reasonable diligence in preparing this statement. I have	e reviewed this statement and to	the best of my kno	wledge the information contained

Schedule D - Income - Gifts - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

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.

Signature Date Signed ____ (File the originally signed paper statement with your filing official.)



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2/6/20 50

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A PUBLIC DOCUMENT

NAME OF FILER (LAST)	(FIRS	T)		(MIDDLE)
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1. Office, Agency,				
Agency Name (Do no				
• •		STRICT		
Division, Board, Depart	RS CEMETERY DI	Your P	osition	
			TRUSTEE	
► If filing for multiple	positions, list below or on an attachment.	(Do not use acronyms)		
Agency:		Position	on:	
2. Jurisdiction of	Office (Check at least one box)			
State	A -		e, Retired Judge, Pro Tem Judg wide Jurisdiction)	ge, or Court Commissioner
Multi-County	olo/Solano	Coun	ty of	
		Other		
	ent (Check at least one box)			1
	riod covered is January 1, 2019, through per 31, 2019.		ving Office: Date Left/. (Check one c	ircle.)
The per	riod covered is/	-or-	The period covered is January eaving office.	
Assuming Office	e: Date assumed/		The period covered is/_ he date of leaving office.	, through
Candidate: Date	of Election and off	ice sought, if different tha	n Part 1:	
		number of pages in	cluding this cover page	
Schedules atta	nched			
Schedule A-1	- Investments - schedule attached		 Income, Loans, & Business F 	
Schedule A-2	- Investments - schedule attached	L	- Income - Gifts - schedule at	
☐ Schedule B -	Real Property - schedule attached	Schedule E	- Income – Gifts – Travel Payn	nents – schedule allached
-or- 🔀 None - No	o reportable interests on any schedu	ıle		
5. Verification				
MAILING ADDRESS (Business or Agency Address	STREET ss Recommended - Public Document)	CITY	STATE	ZIP CODE
100 EAST	MAINST. W.	INTERS	CA	95694
DAYTIME TELEPHONE NU	MBER	EMAIL ADDRESS	;	
(330) 650	-5226	have reviewed this statem	ant and to the heat of my know	dodge the information contained
herein and in any atta	able diligence in preparing this statement. I ched schedules is true and complete. I acl	knowledge this is a public	document.	reage the illionnation contained
I certify under penal	ty of perjury under the laws of the State	of California that the for	regoing is true and correct.	111
Data Signed 154	13 06 2020	Signature	The C.	Dojull
Date Signed	(month, day, year)	Jigilatale	(File the originally signed paper statement	ent with your filing official.)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

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A PUBLIC DOCUMENT

2/28/30

NA	ME OF FILER (LAST) (FIRST)	(MIDDLE)
_	Carbahal Shell	/ L
1.	Agency, or Court Agency Name (Do not use acronyms) Winters (OM Cterry) Division, Board, Department, District, if applicable	Strict Your Position District Manager
	▶ If filing for multiple positions, list below or on an attachment. (Do not	
	Agency:	Position:
2.	Jurisdiction of Office (Check at least one box)	
	☐ State	Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
		Lies County of
	City of	Other
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/(Check one circle.)
	The period covered is/, throug December 31, 2019.	leaving office.
	Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.
	Candidate: Date of Election and office sou	ght, if different than Part 1:
4.	Schedule Summary (must complete) ► Total numb Schedules attached	per 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
-(or- None - No reportable interests on any schedule	
5.	Verification	STATE ZIP CODE
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document) P.O.Box 402 DAYTIME TELEPHONE NUMBER (530) 795-2475 I have used all reasonable diligence in preparing this statement. I have re-	EMAIL ADDRESS WCd 415@ Sbc Global - Net eviewed this statement and to the best of my knowledge the information contained
	herein and in any attached schedules is true and complete. I acknowled	
	I certify under penalty of perjury under the laws of the State of Calif. Date Signed 2/28/2020 (month, day, year)	Signature (File the originally signed paper statement with your filing official.)

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1000 Railroad Ave	
CITY	CITY
Winters	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000 / /19/_19
\$10,001 - \$100,000	\$10,001 - \$100,000 ACQUIRED DISPOSED
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	S100,001 - \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$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.	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	None
I MAT INOTICE	
None	
I None	
IS None	
I № None	
I None	
	al lending institution made in the lender's regular course of
* You are not required to report loans from a commercia	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and
* You are not required to report loans from a commercial business on terms available to members of the public	without regard to your official status. Personal loans and
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business.	without regard to your official status. Personal loans and
* You are not required to report loans from a commercial business on terms available to members of the public	without regard to your official status. Personal loans and iness must be disclosed as follows:
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business of LENDER*	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER*
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business.	without regard to your official status. Personal loans and iness must be disclosed as follows:
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business of LENDER*	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER*
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender* Address (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business OF LENDER* ADDRESS (Business Address Acceptable)	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender* Address (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) None	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business (Business Address Acceptable) BUSINESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business (Business Address Acceptable) BUSINESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) Mone HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
* You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business (Business Address Acceptable) BUSINESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) Whone HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	without regard to your official status. Personal loans and iness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)