

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT



Please type or print in ink.

NAM	E OF FILER (LAST)	(FIRST)		(MIDDLE)	BY:
Bri	stow	Joseph			
1. (	Office, Agency, or Court				- ***
	Agency Name (Do not use acronyms)			-	
	Winters Cemetery District				
i	Division, Board, Department, District, if applicab	е	Your	Position	<u> </u>
	Board		Ch	airperson	
-	▶ If filing for multiple positions, list below or on	an attachment. (Do no	ot use acronyms)		
	Agency:		Pos	ition:	
2.	Jurisdiction of Office (Check at least	one box)			
ļ	State	•		lge, Retired Judge, Pro Tem J tewide Jurisdiction)	ludge, or Court Commissioner
	Multi-County Yolo and Solano		Cou	unty of	
	City of		Oth	er	
3.	Type of Statement (Check at least one	box)			
	Annual: The period covered is January 1, December 31, 2022.	2022, through	Le	eaving Office: Date Left(Check on	
	The period covered is/ December 31, 2022.		gh □ -or	leaving office.	ry 1, 2022, through the date of
	Assuming Office: Date assumed/_			The period covered is the date of leaving office.	_/, through
-	Candidate: Date of Election	and office sou	ght, if different th	nan Part 1:	
4, 3	Schedule Summary (required)	► Total numl	er of pages	including this cover pa	ge: ONE (1)
5	Schedules attached				
	Schedule A-1 - Investments - schedule	attached	Schedule (	C - Income, Loans, & Busines	s Positions - schedule attached
	Schedule A-2 - Investments - schedule		Schedule [	O - Income - Gifts - schedule	attached
	Schedule B - Real Property - schedule	attached	Schedule E	- Income – Gifts – Travel Pa	ayments - schedule attached
10-	- <b>Mone</b> - No reportable interests o	on any schedule			
5. V	erification erification		<del></del>		
	MAILING ADDRESS STREET Business or Agency Address Recommended - Public Docume	CITY		STATE	ZIP CODE
	P.O. Box 402	Win	ters	CA	95694
Ū	AYTIME TELEPHONE NUMBER		EMAIL ADDRES	SS	
_	530 ) 795-2475				
	have used all reasonable diligence in preparing erein and in any attached schedules is true and				owledge the information contained
ı	certify under penalty of perjury under the la	vs of the State of Cali	fornia that the fo	oregoing is true and correct	
				1000	
D	ate Signed 01-19-2023 (month, day, year)		Signature	(File)the originally signed paper state	ement with your filing official.)



### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

Date Initial Filing Rec	eived
JANO	is a
0 500	

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	
Bozarth	Timothy	у		
1. Office, Agency, or Co	urt			200
Agency Name (Do not use a	cronyms)			
Winters Cemetery Dist	rict			
Division, Board, Department, I	District, if applicable	Yo	our Position	
Board		\	/ice-chair	
► If filing for multiple position	s, list below or on an attachment	t. (Do not use acronyn	is)	
A :				
Agency:		P	osition:	
2. Jurisdiction of Office	(Check at least one box)			
State			ludge, Retired Judge, Pro Tem Statewide Jurisdiction)	Judge, or Court Commissioner
Multi-County Yolo and	Solano		County of	
City of			MI	
3. Type of Statement (Ch				
December 31, 2	red is January 1, 2022, through 022.		Leaving Office: Date Left (Check o	ne circle.)
-or- The period cove December 31, 20	red is/		The period covered is Janual leaving office.	nary 1, 2022, through the date of
Assuming Office: Date a	assumed/		• •	/, through
Candidate: Date of Electi	on and c	office sought, if different	than Part 1:	
4. Schedule Summary (r	equired) ► Tota	I number of page:	including this cover p	age: /
Schedules attached			,	
Schedule A-1 - Investm	nents – schedule attached	Schedule	C - Income, Loans, & Busine	ss Positions – schedule attached
	nents – schedule attached		D - Income - Gifts - schedul	
Schedule B - Real Prop	perty - schedule attached	Schedule	E - Income - Gifts - Travel F	Payments - schedule attached
-Or- Mana No reports	able interests on any sched	de da		
5. Verification	wie interests on any sched	luie		
	REET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommen				ZIF CODE
P.O. Box 402  DAYTIME TELEPHONE NUMBER		Winters	CA	95694
(530 ) 795-2475		EMAIL ADDR	ESS	
I have used all reasonable dilige	nce in preparing this statement. I	I have reviewed this sta	tement and to the best of my ki	nowledge the information contained
	ıry under the laws of the State			t.
Date Signed Jal 10	9,2023	Signature	Emy Har C	Grall )
(mon	ur, ugy, year)		(File the originally signed paper sta	tement/with your filing official.)



#### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**



A PUBLIC DOCUMENT

	APUL	DEIG DOGGINIEN I	
Please type or print in ink.	•		BY:
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
JUSTUS	LARRY	W.	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)	= 1		
WINTERS CEMETERY DISTR	RICT		
Division, Board, Department, District, if	applicable	Your Position	
BOARD		TRUSTEE	
► If filing for multiple positions, list belo	w or on an attachment. (Do not us	e acronyms)	
		D. W.	
Agency:		Position:	
2. Jurisdiction of Office (Check a	at least one box)		
State		Judge, Retired Judge, Pro Tem Ju	udge, or Court Commissioner
		(Statewide Jurisdiction)	
Multi-County YOLO AND SOL	ANO	County of	
City of		Other	
3. Type of Statement (Check at le	ast one box)		
Annual: The period covered is Jar	•	Leaving Office: Date Left	
December 31, 2022.	, ., <u></u> ,	(Check one	
The period covered is December 31, 2022.	/, through	The period covered is Januar leaving office.	y 1, 2022, through the date of
Assuming Office: Date assumed		The period covered is the date of leaving office.	/, through
Candidate: Date of Election	and office sought,	if different than Part 1:	
4. Schedule Summary (required	1) > Total number	of pages including this cover pages	ge:
Schedules attached	-y Protai Hambor	or pages meaning and sever page	
Schedule A-1 - Investments – so	shodula attached	Schedule C - Income, Loans, & Business	Positions - schedule attached
Schedule A-2 - Investments – so		Schedule D - Income - Gifts - schedule	
Schedule B - Real Property - so		Schedule E - Income - Gifts - Travel Pa	yments - schedule attached
-or- 🏿 None - No reportable inte	erests on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Publ	ic Document)	STATE	ZIP CODE
P.O. BOX 402	WINTE	RS CA	95694
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(530 ) 795-2475			
I have used all reasonable diligence in pro- herein and in any attached schedules is		ved this statement and to the best of my kno his is a public document.	owledge the information contained
I certify under penalty of perjury unde	r the laws of the State of Californ	ia that the foregoing is true and correct.	1
Date Signed Month, day, ear,	8023 si	gnature <u>FCI MI M</u> (File the originally signed paper state	MOMS  ment with your filing official.)

### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

-or

#### STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Initial Filing Received

A PUBLIC DOCUMENT Please type or print in ink. NAME OF FILER (LAST) (FIRST) (MIDDLE) Kilkenny **Dennis** 1. Office, Agency, or Court Agency Name (Do not use acronyms) Winters Cemetery District Division, Board, Department, District, if applicable Your Position Board 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 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) Multi-County Yolo and Solano County of City of Type of Statement (Check at least one box) Annual: The period covered is January 1, 2022, through Leaving Office: Date Left \_\_\_\_\_/\_ December 31, 2022. (Check one circle.) The period covered is \_\_\_\_\_\_\_, through ☐ The period covered is January 1, 2022, through the date of December 31, 2022. leaving office. Assuming Office: Date assumed \_\_\_\_\_/\_\_\_\_/ The period covered is \_\_\_\_

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:
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
- 🔀 <b>None</b> - No reportable interests on any s	schedule
orification	

the date of leaving office.

5. Verification MAILING ADDRESS STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) P.O. Box 402 Winters CA 95694 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	1/36/2 3 (month, day, year)	Signature (File the originally signed paper statement with your filing official.)
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# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

	ate Initial Filing Re	ceived
411	FEB 0 8 202;	B
	200	

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)			(MIDDLE)	2/1
Hague	Viona				
I. Office, Agency, or Court					
Agency Name (Do not use acronym	s)				
Winters Cemetery District	•				
Division, Board, Department, District,	if applicable		Your Posit	ion	
Board			Trustee	•	
▶ If filing for multiple positions, list b	elow or on an attachme	ent. (Do not u	use acronyms)		
Agency:		···	Position:		
Jurisdiction of Office (Chec	k at least one box)				
State	,			etired Judge, Pro Tem . e Jurisdiction)	Judge, or Court Commissioner
Multi-County Yolo and Solane	0		County o	f	
City of					
Type of Statement (Check at					
Annual: The period covered is J December 31, 2022.		h	Leaving	Office: Date Left(Check on	
The period covered is _ December 31, 2022.		, through		period covered is Janua ng office.	ry 1, 2022, through the date of
Assuming Office: Date assume	3/		The	period covered is ate of leaving office.	_/, through
Candidate: Date of Election	and	d office sought	t, if different than Pa	ırt 1:	
Schedule Summary (require	ed) ► To	tal number	of pages inclu	ding this cover pa	ge:
Schedules attached					
Schedule A-1 - Investments -	schedule attached		Schedule C - Inc	ome, Loans, & Busines	s Positions - schedule attached
Schedule A-2 - Investments -	schedule attached			ome – Gifts – schedule	
Schedule B - Real Property -	schedule attached		Schedule E - Inc	ome – Gifts – Travel Pa	syments - schedule attached
None Ne remarkable in		ll-			
r-	terests on any sche	eaule			
MAILING ADDRESS STREET		CITY		STATE	ZIP CODE
(Business or Agency Address Recommended - Pu	ıblic Document)	OIII		SIAIE	ZIP CODE
P.O. Box 402		Winter		CA	95694
DAYTIME TELEPHONE NUMBER			EMAIL ADDRESS		
(530 ) 795-2475					
I have used all reasonable diligence in pherein and in any attached schedules is	oreparing this statement. s true and complete. I	. I have revie acknowledge	wed this statement a this is a public docu	ind to the best of my kno ment.	owledge the information contained
certify under penalty of perjury und	er the laws of the Sta	te of Californ	ia that the foregoi	ng is true and correct.	
4/1/1	400		-1	1 . (1)	
Date Signed Feb. 6, 2	023	Si	gnature	iona Tha	gue

# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT



A PUBLIC DOCUMENT

Please type or print in ink.			BY:
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
Carbahal	Sheila	L	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms) Winters Cemetery District			
Division, Board, Department, District, if applie	cable	Your Position	
Administration		District Manager	
▶ If filing for multiple positions, list below or	on an attachment. (Do not us	se acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Check at lea	ast one box)		
State		Judge, Retired Judge, Pro Tem Ju (Statewide Jurisdiction)	udge, or Court Commissioner
Multi-County Yolo and Solano		County of	
City of		Other	
3. Type of Statement (Check at least of			
Annual: The period covered is January December 31, 2022.	1, 2022, through	Leaving Office: Date Left(Check one	
The period covered is/_ December 31, 2022.	, through	The period covered is Januar leaving office.	y 1, 2022, through the date of
Assuming Office: Date assumed			/, through
Candidate: Date of Election	and office sought,	, if different than Part 1:	
. Schedule Summary (required)	► Total number	of pages including this cover page	ge: <sup>3</sup>
Schedules attached			
Schedule A-1 - Investments – schedule Schedule A-2 - Investments – schedule Schedule B - Real Property – schedule Description – Schedule B - Real Property – schedule Description – None - No reportable interest	ule attached	Schedule C - Income, Loans, & Business Schedule D - Income - Gifts - schedule E - Income - Gifts - Travel Pay	attached
. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Doc	CITY cument)	STATE	ZIP CODE
P.O. Box 402	Winters	c CA	95694
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(530 ) 795-2475		Sheila@winterscemetery.org	
I have used all reasonable diligence in preparir herein and in any attached schedules is true a			wledge the information contained
I certify under penalty of perjury under the	laws of the State of Californ	ia that the foregoing is true and correct.	
Date Signed 3/10/2023	) Si	gnature (File the primarily simed packets to	rbaha O

## **SCHEDULE B** Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Sheila Carbahal

315 Peach Place  CITY  Winters
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 Easement
Leasehold 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 Caitlyn & Cameron Rodriguez  Al lending institution made in the lender's regular course of the source of income of \$10,000 or more.
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)
INTEREST RATE TERM (Months/Years)%
%
% None

### **SCHEDULE B** Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

ASSESSOR'S PARCEL NUMBER OR STR	EET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
207 Lenis Avenue		
CITY		CITY
Winters		
FAIR MARKET VALUE   IF APPL   \$2,000 - \$10,000   \$10,001 - \$100,000   ACQ   Over \$1,000,000   Over \$1,000,000   NATURE OF INTEREST   Ownership/Deed of Trust   Leasehold   Yrs. remaining   IF RENTAL PROPERTY, GROSS INCOME		FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
\$0 - \$499 \$500 - \$1,000	\$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER	R \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you interest, list the name of each tenant t income of \$10,000 or more.  None	hat is a single source of	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
Brandi Carrion and Keith Burns		
You are not required to report to business on terms available to	pans from a commerci members of the public	cial lending institution made in the lender's regular course of ic without regard to your official status. Personal loans and siness must be disclosed as follows:
You are not required to report lo	pans from a commerci members of the public	ic without regard to your official status. Personal loans and
You are not required to report lo business on terms available to loans received not in a lender's	pans from a commerci members of the public	ic without regard to your official status. Personal loans and siness must be disclosed as follows:
You are not required to report lo business on terms available to r loans received not in a lender's NAME OF LENDER*	pans from a commerci members of the public regular course of bus	ic without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*
You are not required to report to business on terms available to a loans received not in a lender's NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDE	pans from a commerci members of the public regular course of bus	ic without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
You are not required to report to business on terms available to a loans received not in a lender's NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDE	pans from a commerci members of the public regular course of bus	ic without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
You are not required to report to business on terms available to reloans received not in a lender's NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDE INTEREST RATE  TER	pans from a commerci members of the public regular course of bus R M (Months/Years)	ic without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
You are not required to report to business on terms available to reloans received not in a lender's NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDE INTEREST RATE  TER	pans from a commerci members of the public regular course of bus R M (Months/Years)	ic without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
You are not required to report to business on terms available to a loans received not in a lender's NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDE  INTEREST RATE TER	eans from a commerci members of the public regular course of bus R M (Months/Years)	ic without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)

### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

#### STATEMENT OF ECONOMIC INTERESTS) INTERESTS IN THE PROPERTY OF ECONOMIC INTERESTS INTERESTS IN THE PROPERTY OF ECONOMIC INTERESTS INTERESTS IN THE **COVER PAGE**

A PUBLIC DOCUMENT



Please type or print in ink.		RV.		
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)		
Velasquez	Mark			
1. Office, Agency, or Court				
Agency Name (Do not use acronyms)				
Winters Cemetery District				
Division, Board, Department, District, if applicab	le	Your Position		
		General Counsel		
► If filling for multiple positions, list below or on	an attachment. (Do not u			
Agency:		Position:		
2. Jurisdiction of Office (Check at least	one box)			
State		<ul> <li>Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)</li> </ul>		
Multi-County		County of		
City of		X Other Yolo County And Solano SC		
3. Type of Statement (Check at least one	box)			
Annual: The period covered is January 1, December 31, 2021.	2021, through	Leaving Office: Date Left 10 / 28 / 2022 (Check one circle.)		
-or- The period covered is/ December 31, 2021.	, through	The period covered is January 1, 2021, through the date of leaving officeor-		
Assuming Office: Date assumed/_		The period covered is 01 / 01 / 2022 , through the date of leaving office.		
Candidate: Date of Election	and office sought	i, if different than Part 1:		
4. Schedule Summary (must comple	te) > Total number	of pages including this cover page: 2		
Schedules attached	ic) Frotal number	of pages including this cover page:2		
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 a	attached	Schedule E - Income - Gifts - Travel Payments - schedule attached		
-or- ☐ None - No reportable interests of	on any schodulo			
5. Verification	on any schedule			
MAILING ADDRESS STREET	CITY	STATE ZIP CODE		
(Business or Agency Address Recommended - Public Docume	<sup>nnt)</sup> Sacrai	mento CA 95814		
500 Capitol Mall, Suite 1700  DAYTIME TELEPHONE NUMBER	Sacrai	EMAIL ADDRESS		
( 916 ) 325-4000		mark.velasquez@bbklaw.com		
I have used all reasonable diligence in preparing		wed 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 10 18 2022	S.	ignature White Velocities (File the originally signed paper statement with your filing official.)		

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

	ORNIA FORM 700 LITICAL PRACTICES COMMISSION
Name	
	Mark Velasquez

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Best Best & Krieger LLP	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
500 Capitol Mall, Suite 1700, Sacramento, CA 95814	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Of Counsel	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Onl
\$500 - \$1,000\$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 X OVER \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (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)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	PERIOD
a retail installment or credit card transaction, made in the	lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s:  INTEREST RATE  TERM (Months/Years)
NAME OF LENDER	INTEREST RATE TERM (MOTION TOdis)
ADDRESS (Business Address Acceptable)	
	% None
NOUNEGO (Dualilego Nullego Nocepiable)	
	SECURITY FOR LOAN  None  Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN
	SECURITY FOR LOAN
	SECURITY FOR LOAN  None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN  None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN  None Personal residence  Real Property  Street address  City
BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	SECURITY FOR LOAN  None Personal residence  Real Property  Street address
BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	SECURITY FOR LOAN None Personal residence Real Property Street address City Other
BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000  \$10,001 - \$100,000	SECURITY FOR LOAN None Personal residence Real Property Street address City Guarantor