CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

RECEIVED
Date Initial Filing Received
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A PUBLIC DOCUMENT

JAN 24 2024

TULARE COUNTY EMPLOYEES

Please type or print in ink.			DETIDEMENT ASSOCIATION
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
Young	James	E	
1. Office, Agency, or Court			
Agency Name (Do not use acronym	s)		
Tulare County Employees F	tetirement Association		
Division, Board, Department, District,	if applicable	Your Position	
Board		Vice Chairman	
► If filing for multiple positions, list I	pelow or on an attachment. (Do not	use acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Che	ck at least one box)		
State		Judge, Retired Judge, Pro Tem (Statewide Jurisdiction)	Judge, or Court Commissioner
Multi-County		County of Tulare	
City of		Other	
3. Type of Statement (Check a	it least one box)		
Annual: The period covered is December 31, 2023.	January 1, 2023, through	Leaving Office: Date Left (Check of	one circle.)
The period covered is December 31, 2023.	, through	of leaving office.	uary 1, 2023, through the date
Assuming Office: Date assum	ned	The period covered is the date of leaving office.	/, through
Candidate: Date of Election _	and office sou	ght, if different than Part 1:	
4. Schedule Summary (requ	ired) ► Total numb	er of pages including this cover	page:
Schedules attached			
	sahadula attaabad	Schedule C - Income, Loans, & Busin	ess Positions - schedule attached
Schedule A-1 - Investments Schedule A-2 - Investments		Schedule D - Income - Gifts - schedu	
		Schedule E - Income - Gifts - Travel	
Schedule B - Real Property	- Scriedule attached		
-or- None - No reportable	interacte on any schodula		
	interests on any soriedate		
5. Verification	CITY	STATE	ZIP CODE
MAILING ADDRESS STREET (Business or Agency Address Recommended)	1.731131	OIAIL	2 0002
2311 E. Hillcrest	Visa		93292
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(559) 799-1908		jimyoung01@gmmail.com	
herein and in any attached schedul	es is true and complete. I acknowled		
I certify under penalty of perjury	under the laws of the State of Cal	fornia that the foregoing is true and corr	ect.
Date Signed January 22, 202	23	Signature	-
Date Signed January 22, 202			r statement with your filing official.)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date RECEIVED d
Filing Official Use Only

JAN 16 2024

Please type or print in ink.

TULARE COUNTY EMPLOYEES'

NAME OF FILER (LAST) Cook	(FIRST) Cass			Michael	
1. Office, Agency, or Court					
Agency Name (Do not use acronyms Tulare County Employees' R					
Division, Board, Department, District, i			Your Position		
			Board Trust	tee	
► If filing for multiple positions, list be	elow or on an attachment.	Do not use acro			
Agency:			Position:		
2. Jurisdiction of Office (Chec	k at least one box)				
State			Judge, Retired		ge, or Court Commissioner
Multi-County			County of Tu	ulare	
City of			Other		
3. Type of Statement (Check at			1 045	D-t- 1-#	
Annual: The period covered is December 31, 2023.	January 1, 2023, through		Leaving Oπi	ce: Date Left/ (Check one of	
-or- The period covered is December 31, 2023.		, through	of leaving		1, 2023, through the date
Assuming Office: Date assume	ed			od covered is/_ of leaving office.	, through
Candidate: Date of Election	and of	fice sought, if diff	erent than Part 1		
4. Schedule Summary (requi	red) ► Total	number of p	ages includin	g this cover page	e: 2
Schedules attached					
	to data attached	Sch	edule C - Income	e. Loans. & Business	Positions – schedule attached
Schedule A-1 - Investments				e – Gifts – schedule a	
Schedule A-2 - Investments					ments - schedule attached
Schedule B - Real Property	- Scriedule attached				
-or- None - No reportable	interests on any school	ulo			
	interests on any soned	uic			
5. Verification MAILING ADDRESS STREET		CITY		STATE	ZIP CODE
(Business or Agency Address Recommended -	- Public Document)			0.0	02201
136 North Akers		Visalia	ADDDECC	CA	93291
DAYTIME TELEPHONE NUMBER		EMA	L ADDRESS		
(559) 713-2900					. I. I the information contained
I have used all reasonable diligence herein and in any attached schedule	in preparing this statement. es is true and complete. I a	I have reviewed cknowledge this i	nis statement and s a public docume	to the best of my kno ent.	wiedge the information contained
I certify under penalty of perjury u	under the laws of the State	of California th	at the foregoing	is true and correct.	
4/44/0004				3/	
Date Signed 1/11/2024 (month, da	ay, year)	Signa		the originally signed paper state	ment with your filing official.)

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

(Ownership Interest is 10% or Greater)

The Cranium Company Name 2754 Wast Newton, Visalia, CA 93291 Address (Business Address Acceptable) Check one That, go to 2 Business Entity, complete the box, then go to 2 GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS FAIR MARKET VALUE IF APPLICABLE, LIST DATE: 50 - 51,399 \$20,00 - 510,000 \$10,000 - 13,000,000 ACQUIRED DISPOSED S10,001 - 51,000,000 ACQUIRED DISPOSED S10,001 - 51,000,000 S500 - 51,000 S500	► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Name 2754 West Newton, Visalia, CA 93291 Address (Business Address Acceptable) Check one Trust, go to 2	The Cranium Company	
Address (Business Address Acceptable) Check one Trust, go to 2		Name
Check one Trust, go to 2 Business Entity, complete the box, then go to 2 GENERAL DESCRIPTION OF THIS BUSINESS FAIR MARKET VALUE	2754 West Newton, Visalia, CA 93291	
Trust, go to 2	Address (Business Address Acceptable)	Address (Business Address Acceptable)
GENERAL DESCRIPTION OF THIS BUSINESS FAIR MARKET VALUE S0 - \$19.999 \$2.000 - \$10.0000 ACQUIRED DISPOSED \$10.001 - \$100.0000 ACQUIRED DISPOSED \$10.001 - \$100.0000 NATURE OF INVESTMENT Partnership Sole Proprietorship Other YOUR BUSINESS POSITION ALIDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499 \$10.001 - \$10.0000 \$1.001 - \$10.0000 \$1.001 - \$10.0000 OVER \$1.0000 \$1.001 - \$10.0000 OVER \$1.0000 \$1.001 - \$10.0000 \$1.001 - \$10.0000 OVER \$1.0000 \$1.001 - \$10.0000 \$1.001 - \$10.0000 OVER \$1.0000 \$1.001 - \$10.00	전 경험하면 <u>하는 것</u> 하는 것이 되었다. 그는 것이 되었다면 하는 것이다면 하	
FAIR MARKET VALUE S0 - \$19.99 \$2.00 - \$10.000 \$10.001 - \$1.000.000 Over \$1.000.000 NATURE OF INVESTMENT Partnership S0 - \$1.999 \$2.00 - \$1.000.000 NATURE OF INVESTMENT Partnership None or Names listed below **A : INVESTMENT REAL PROPERTY Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property PAIR MARKET VALUE \$2.00 - \$1.000.000 NATURE OF INVESTMENT PARTNERSTS IN REAL PROPERTY Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property PAIR MARKET VALUE \$2.00 - \$1.000.000 ACQUIRED DISPOSED **A : INVESTMENT REAL PROPERTY Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property PAIR MARKET VALUE \$2.00 - \$1.000.000 ACQUIRED DISPOSED **A : INVESTMENT REAL PROPERTY Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property PAIR MARKET VALUE \$2.00 - \$1.000.000 ACQUIRED DISPOSED Over \$1.000.000 ACQUIRED Check box if additional schedules reporting investments or real property Check box if additional schedules reporting investments or real property Check box if additional schedules reporting investments or real property	Trust, go to 2 Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
\$0. \$1,999 \$2,000 - \$10,0000 ACQUIRED DISPOSED \$10,0001 - \$100,0000 ACQUIRED DISPOSED \$10,0001 - \$10,00000 ACQUIRED DISPOSED \$10,0001 - \$10,00000 ACQUIRED DISPOSED \$10,0001 - \$10,000,0000 ACQUIRED DISPOSED \$10,0001 - \$10,000,000 ACQUIRED DISPOSED ACQ	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Partnership Sole Proprietorship Other YOUR BUSINESS POSITION > 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$ 0 - \$499	\$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
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SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$ 30 - \$499 \$ \$10,001 - \$100,000 \$ \$500 - \$1,000 \$ \$00 - \$1,001 - \$100,000 \$ \$0.001	YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
■ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) ■ A. 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 PAR MARKET VALUE FAR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$1,000,000 NATURE OF INTEREST Property Ownership/Deed of Trust Check box if additional schedules reporting investments or real property Check box if additional schedules reporting investments or real property A. INVESTMENT 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 Name of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or C	SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499 \$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 S500 - \$1,000 OVER \$100,000
None or Names listed below A. 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 FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership Check box if additional schedules reporting investments or real property None or Names listed below Name of Business Activity or Investment, or Assessor's Parcel Number or Street Address of Real Property Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of 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 Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Property Description of Business Activity or City or Other Precise Location of Real Prope		
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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 FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 \$10,001 - \$1,000,000 Over \$1,000,000 NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership Leasehold Yrs. remaining Check box if additional schedules reporting investments or real property Check box if additional schedules reporting investments or real property Check box if additional schedules reporting investments or real property Check box if additional schedules reporting investments or real property		
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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		
City or Other Precise Location of Real Property FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership Check box if additional schedules reporting investments or real property City or Other Precise Location of Real Property FAIR MARKET VALUE \$2,000 - \$10,000 \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership Leasehold Yrs. remaining Check box if additional schedules reporting investments or real property Check box if additional schedules reporting investments or real property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
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Property Ownership/Deed of Trust Stock Partnership Leasehold Yrs. remaining Other Check box if additional schedules reporting investments or real property Property Ownership/Deed of Trust Stock Partnership Leasehold Yrs. remaining Other Check box if additional schedules reporting investments or real property	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 ACQUIRED DISPOSED	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 ACQUIRED DISPOSED
Yrs. remaining Check box if additional schedules reporting investments or real property Check box if additional schedules reporting investments or real property Check box if additional schedules reporting investments or real property		

Comments: _

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

RECEIVED

Date Initial Filing Received MAR 160 8/5 2024

TULARE COUNTY EMPLOYEES'

Please type or print in ink.

RETIREMENT ASSOCIATION NAME OF FILER (LAST) (FIRST) (MIDDLE) Vejvoda Craig Matthew 1. Office, Agency, or Court Agency Name (Do not use acronyms) Tulare County Employees Retirement Association Division, Board, Department, District, if applicable Your Position Trustee ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: Tulare County Association of Governments Measure R Oversight Committee Position: 2. Jurisdiction of Office (Check at least one box) State Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) County of Tulare Multi-County Other City of 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through Leaving Office: Date Left _____/____ December 31, 2023. (Check one circle.) -or-The period covered is ______, through The period covered is January 1, 2023, through the date December 31, 2023. of leaving office. Assuming Office: Date assumed 2 , 2024 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 (required) ► Total number of pages including this cover page: Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - 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 STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document) 1920 Cabernet Dr Tulare CA 93274 DAYTIME TELEPHONE NUMBER **EMAIL ADDRESS** (559) 358-0577 cvejvoda@lightspeed.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. 3/8/2024 Date Signed Signature (month, day, year) (File the originally signed paper statement with your filing official.)

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.

No. of Street, or other Persons	CALIFORNIA FORM 700
Defairing.	FAIR POLITICAL PRACTICES COMMISSION
•	Name

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Galaxy Gig Harbor	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Movie Theater	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT LLC	NATURE OF INVESTMENT Stock Other
(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 / /23	/ /23 / /23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 / /23	/ /23 / /23

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

	FORM 700 RACTICES COMMISSION
Name	

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Conway Consulting	
Name 1920 Cabernet Dr, Tulare CA 93274	Name
Address (Business Address Acceptable) Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Address (Business Address Acceptable) Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS Business Consultant	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RAT SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499	\$0 - \$499
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
INVESTMENT REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of 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	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 /23 /23 /23 /23 /23 /23 /23
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments: _

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

FAIR POI	ITICAL	A FOR	ES COM	MISSION
Name				A 241 (0 A
Name	一			

	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Igor Ferreira	Igor Ferreira
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
200 N M St., Tulare, CA 93274	200 N M St., Tulare CA 93274
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Financial Advisor	Financial Advisor
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Retired	Retired
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 W OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary 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.)
Book of Business 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
Other	(Describe)
* You are not required to report loans from a commercial 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
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official	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
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official regular course of business must be disclosed as follows:	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
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in the to members of the public without regard to your official regular course of business must be disclosed as follows: NAME OF LENDER*	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)
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RECEIVED

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

Date Initial Films Received

TULARE COUNTY EMPLOYEES'
RETIREMENT ASSOCIATION

lease type or print in ink.	(FIDOX)	(MIDDLE)			
AME OF FILER (LAST)	(FIRST) David	Cervantes			
Vasquez	Daviu				
. Office, Agency, or Court					
Agency Name (Do not use acronyms)					
Tulare County Employee Retirem		V - Dorition			
Division, Board, Department, District, if appli	cable	Your Position			
Board		Trustee			
▶ If filing for multiple positions, list below o	r on an attachment. (Do not use ac	ronyms)			
Agency:		_ Position:			
. Jurisdiction of Office (Check at le	east one box)				
		Judge, Retired Judge, Pro Tem Judge	ge, or Court Commissioner		
State		(Statewide Jurisdiction)			
Multi County		County of Tulare			
Multi-County		Other			
City of					
3. Type of Statement (Check at leas	t one box)				
Annual: The period covered is Janua December 31, 2023.		Leaving Office: Date Left(Check one	circle.)		
The period covered is	<u></u>	The period covered is January 1, 2023, through the date of leaving office.			
Assuming Office: Date assumed	<u></u>	The period covered is the date of leaving office.	, through		
Candidate: Date of Election	and office sought, if	different than Part 1:			
Candidate: Date of Election		THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.			
4. Schedule Summary (required)	► Total number o	f pages including this cover pag	le:		
Schedules attached					
Schedule A-1 - Investments - sch	edule attached	Schedule C - Income, Loans, & Business			
Schedule A-2 - Investments - sch	edule attached	Schedule D - Income - Gifts - schedule			
Schedule B - Real Property - sch		Schedule E - Income - Gifts - Travel Pay	yments - schedule attached		
-or- No reportable inter	rests on any schedule				
5. Verification					
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE		
(Business or Agency Address Recommended - Public	Document) Visalia	CA	93291		
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS			
(550) 742 2000		info@tularecounty.ca.gov			
I have used all reasonable diligence in pro-	eparing this statement. I have review	ed this statement and to the best of my kn	owledge the information contai		
I certify under penalty of perjury unde	r the laws of the State of Californi	a that the foregoing is true and correct	//		
Date Signed 1/16/2024	Sic	gnature / a	10		
Date Signed 1/16/2024 (month, day, year		(File the originally signed paper sta	tement with your filing official.)		



CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Date Initial File 1 1 e 5 e i 2024
Filing Official Use Only

TULARE COUNTY EMPLOYEES' RETIREMENT ASSOCIATION

A PUBLIC DOCUMENT

IAME OF FILER (L	LAST)	(FIRST)		(MIDDLE)		
	REED	GARY		EARL		
Office, Ag	ency, or Court					
Agency Name	(Do not use acronyms)					
H	CEPA) TULARE	COUNTY Employer	Retirent System			
Division, Boar	rd, Department, District, if ap	olicable	Your Position			
► If filing for	multiple positions, list below	or on an attachment. (Do not	use acronyms)			
Agency:			Position:			
Jurisdicti	on of Office (Check at	least one box)				
State			Judge, Retire	d Judge. Pro Tem Jud	ge, or Court Commissioner	
Clate			(Statewide Jul			
Multi-County			X County of	TULARE		
City of			Other			
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			the date	of leaving office.		
Candida	ate: Date of Election	and office sou	ight, if different than Part 1	STILL EXPLOSES IN		
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	dule A-1 - Investments - sci		Schedule D - Incom	Schedule D - Income - Gifts - schedule attached		
	dule B - Real Property - sc		Schedule E - Incom	e – Gifts – Travel Pay	ments - schedule attached	
-or- No	ne - No reportable inte	rests on any schedule				
5. Verification	on					
MAILING ADDR	RESS STREET gency Address Recommended - Publi	c Document)		STATE	ZIP CODE	
(Busiliess of Ag	212 North		Portervue	CA	9.3257	
	PHONE NUMBER		EMAIL ADDRESS			
(559)	784-1472	eparing this statement. I have r	garyere	ad 1 @ yahow. (Con	
I have used herein and i	all reasonable diligence in pro n any attached schedules is	eparing this statement. I have retrue and complete. I acknowle	reviewed this statement and dge this is a public docum	d to the best of my knownent.	wledge the information contain	
I certify und	der penalty of perjury unde	r the laws of the State of Cal	lifornia that the foregoing	is true and correct.		
				1 1		
Date Signed	2 14 24		Signature	the giginally signed paper state	ment with your filing official.)	

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. CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

GARY REED

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
ALTRIA	BANK OF SICRES
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
TUBACCO CO.	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
✓ Stock Other (Describe)	∠Stock Other (Describe)
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Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 / /23	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
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Computer	Phapemoutien
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IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED

Comments: _

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

GAG REND

GENERAL DESCRIPTION OF THIS BUSINESS OF ALL MARKET VALUE SLOOD - \$10,000	NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
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Investments

Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Investments must be itemized. Do not attach brokerage or financial statements. CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
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Stock Other	Stock Other
Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 / /23	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized. Do not attach brokerage or financial statements. CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

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Partnership Income Received of \$0 - \$499 Partnership Income Received of \$0 income Received of \$0 income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: J 23	\$499
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GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS	
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FAIR MARKET VALUE \$2,000 - \$10,000	
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Stock Other Stock Other	Describe)
Partnership Income Received of \$0 - \$499 Partnership Income Received of \$0	- \$499
Income Received of \$500 or More (Report on Schedule C) Income Received of \$500	0 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	
ACQUIRED DISPOSED ACQUIRED DISPOSED	
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GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS	
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Stock Other Other	coriba)
(Describe)	escribe)
	c3999
IF APPLICABLE, LIST DATE:	
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ACQUIRED DISPOSED DISPOSED	0 or More (Report on Schedule C)

Comments:

Investments

Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

NAME OF RISINESS ENTITY	NAME OF BUSINESS ENTITY
TBM	Phine
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
\mathcal{T}_{a} .	PHARMECUTICAL
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \rightarrow \$10,001 - \$100,000	\$2,000 - \$10,000 \(\sigma \) \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
1 20	04 118 12305 7,20,123
7 09 123 7 120 123 ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Household PRODUCTS	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
\$100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other
Stock Other (Describe)	(Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
02 120 123 13 7 120 123	<u>j j23 j23</u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
VER120N	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Telephone	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$10,000 \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	INAY OR YEST RENTAL
XStock Other (Describe)	Stock Other(Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ARINO 123 7 120 123	
ACQUIRED DISPOSED	ACQUIRED DISPOSED

Comments:

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater),

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

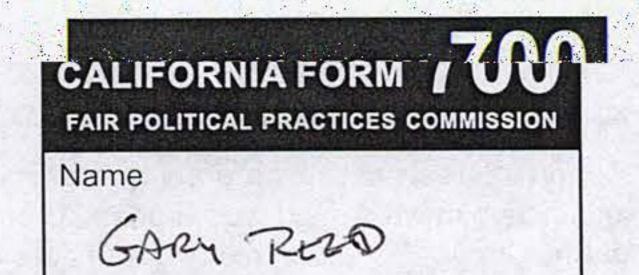
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SCHEDULE B Interests in Real Property (Including Rental Income)



SSESSOR'S PARCEL NUMBER OR STREET ADDRESS M CAST PUTNIM AND	
ITY 212 NORTH MINST	CITY
Portenule, c4 93257	
AIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000
ATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
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	\$10,001 - \$100,000 OVER \$100,000
OURCES OF RENTAL INCOME: If you own a 10% or greater nterest, list the name of each tenant that 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
ncome of \$10,000 or more.	income of \$10,000 or more.
None None MARL - Shoema Ker (RUTNAM! MAIN INVESTMENTS)	income of \$10,000 or more.
* You are not required to report loans from a comme business on terms available to members of the put	rcial 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 comme business on terms available to members of the put	rcial lending institution made in the lender's regular course
* You are not required to report loans from a comme business on terms available to members of the put to the contract of the	income of \$10,000 or more. None rcial lending institution made in the lender's regular course olic without regard to your official status. Personal loans and usiness must be disclosed as follows:
* You are not required to report loans from a comme business on terms available to members of the put ware considered for the put NAME OF LENDER*	income of \$10,000 or more. None rcial lending institution made in the lender's regular course plic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER*
* You are not required to report loans from a comme business on terms available to members of the put tomes was very not in a lender's equilar course of honor NAME OF LENDER* ADDRESS (Business Address Acceptable)	income of \$10,000 or more. None rcial lending institution made in the lender's regular course plic without regard to your official status. Personal loans and usiness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
* You are not required to report loans from a comme business on terms available to members of the publicans received not in a lender's equilar source of honores (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	income of \$10,000 or more. None rcial lending institution made in the lender's regular course of the lender's regular cour
* You are not required to report loans from a comme business on terms available to members of the put business conterns available to members of the put business excever, rothing lender's equilar source of how name of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) None	income of \$10,000 or more. None Provided lending institution made in the lender's regular course of the lending institution made in the lender's regular course of the lending institution made in the lender's regular course of the lending institution made in the lender's regular course of the lending institution made in the lender's regular course of the lender's regul
* You are not required to report loans from a comme business on terms available to members of the put bans received not in a lender's equilar source of honor name of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	income of \$10,000 or more. None rotal lending institution made in the lender's regular course of the state of the lender's regular course of the state of the lender's regular course of
* You are not required to report loans from a comme business on terms available to members of the put loans received not in a lender's equilar source of he NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) ———————————————————————————————————	income of \$10,000 or more. None None rcial lending institution made in the lender's regular course of the polic without regard to your official status. Personal loans and assiness must be disclosed as follows. NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD
* You are not required to report loans from a comme business on terms available to members of the put bans received not in a lender's equilar source of honor name of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	income of \$10,000 or more. None None rcial lending institution made in the lender's regular course of the control of the control of the course of the cou

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
GAM ROOF

I. INCOME RECEIVED	► 1. INCOME RECEIVED			
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE YOUR BUSINESS POSITION			
BUSINESS ACTIVITY, IF ANY, OF SOURCE				
YOUR BUSINESS POSITION				
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position O			
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000			
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000			
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED			
Salary 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	J.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) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE	(Describe)			
a retail installment or credit card transaction, made in the	tatus. Personal loans and loans received not in a lender's			
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)			
ADDRESS (Business Address Acceptable)	% None			
	SECURITY FOR LOAN			
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence			
UICLIECT DALANCE DUDING DEDODTING DEDICE	Real Property			
HIGHEST BALANCE DURING REPORTING PERIOD				
\$500 - \$1,000	City			
\$1,001 - \$10,000	Guarantor			
\$10,001 - \$100,000				
OVER \$100,000	Other			
	Other(Describe)			

SCHEDULE D Income - Gifts

	► NAME OF SOURCE (Not an Acronym)			
DRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
SINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
TE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
	/ / \$			
NAME OF SOURCE (Not an Acronym)	/\$			
\$\$	NAME OF SOURCE (Not an Acronym) ADDRESS (Business Address Acceptable)			
NAME OF SOURCE (Not an Acronym)				
NAME OF SOURCE (Not an Acronym) ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
NAME OF SOURCE (Not an Acronym) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE	ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE			
NAME OF SOURCE (Not an Acronym) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE	ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE			
NAME OF SOURCE (Not an Acronym) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE	ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE			

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CAL	IFORN	IIA FO	ORM	70	0
Nan	POLITICA	LPRAC	IIGES C	OMMISS	ION

Mark either the gift or income box.

Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.

• For gitts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S)://	DATE(S):/
MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: Gift -or- Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
If Gift, Provide Travel Destination	▶ If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/	DATE(S):
MUST CHECK ONE: —Gift Jorlacome	(If gift) ▶MUST_CHECK_CNIF: inloonie^
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments:	
Comments:	

The Political Reform Act (Gov. Code Sections 81000-91014) requires most state and local government officials and employees to publicly disclose their economic interests including personal assets and income. The Act's conflict of interest provisions also disqualify a public official from taking part in a governmental decision if it is reasonably foreseeable that the decision will have a material financial effect on these economic interests as well as the official's personal finances and those of immediate family. (Gov. Code Sections 87100 and 87103.) The Fair Political Practices Commission (FPPC) is the state agency responsible for issuing the attached Statement of Economic Interests, Form 700, and for interpreting the Act's provisions.

Gift Prohibition

Gifts received by most state and local officials, employees, and candidates are subject to a limit. In 2023-2024, the gift limit increased to \$590 from a single source during a calendar year.

Additionally, state officials, state candidates, and certain state employees are subject to a \$10 limit per calendar month on gifts from lobbyists and lobbying firms registered with the Secretary of State. See Reference Pamphlet, page 10.

State and local officials and employees should check with their agency to determine if other restrictions apply.

Disqualification

Public officials are, under certain circumstances, required who signally in the needless from making anadicinally of attempting to influence governmental decisions that will affect their economic interests. This may include interests they are not required to disclose. For example, a personal residence is often not reportable, but may be grounds for disqualification. Specific disqualification requirements apply to 87200 filers (e.g., city councilmembers, members of boards of supervisors, planning commissioners, etc.).

These officials must publicly identify the economic interest undividences a commod of interest at an elave in the commod of ere a discussion or vote takes place at a public meeting. For more information, consult Government Code Section 67105, Regulation 18707, and the Guide to Recognizing Conflicts of Interest page at www.fppc.ca.gov.

Honorarium Ban

Most state and local officials, employees, and candidates are prohibited from accepting an honorarium for any speech given, article published, or attendance at a conference, convention, meeting, or like gathering. (See Reference Pamphlet, page 10.)

Loan Restrictions

Certain state and local officials are subject to restrictions on loans. (See Reference Pamphlet, page 14.)

There are restrictions on representing clients or employers

Post-Governmental Employment

before former agencies. The provisions apply to elected state officials, most state employees, local elected officials, county crief administrative understanding the chief administrator of a city, and general managers or chief administrators of local special districts and DPAS. The PPC website mass after sheets expressing the provisions.

Late Filing

The filing officer who retains originally-signed or electronically filed statements of economic interests may impose on an individual a fine for any statement that is filed late. The fine is \$10 per day up to a maximum of \$100. Late filing penalties may be reduced or waived under certain circumstances.

Persons who fail to timely file their Form 700 may be referred to the FPPC's Enforcement Division (and, in some cases, to the Attorney General or district attorney) for investigation and possible prosecution. In addition to the late filing penalties, a fine of up to \$5,000 per violation may be imposed.

For assistance concerning reporting, prohibitions, and restrictions under the Act:

- Email questions to advice@fppc.ca.gov.
- Call the FPPC toll-free at (866) 275-3772.

Form 700 is a Public Document Public Access Must Be Provided

Statements of Economic Interests are public documents. The filing officer must permit any member of the public to inspect and receive a copy of any statement.

- Statements must be available as soon as possible during the agency's regular business hours, but in any event not later than the second business day after the statement is received. Access to the Form 700 is not subject to the Public Records Act procedures.
- No conditions may be placed on persons seeking access to the forms.
- No information or identification may be required from persons seeking access.
- Reproduction fees of no more than 10 cents per page may be charged.

Questions and Answers Continued

- Q. The value of my stock changed during the reporting period. How do I report the value of the stock?
- A. You are required to report the highest value that the stock reached during the reporting period. You may use your monthly statements to determine the highest value. You may also use the entity's website to determine the highest value. You are encouraged to keep a record of where you found the reported value. Note that for an assuming office statement, you must report the value of the stock on the date you assumed office.
- Q. I am the sole owner of my business, an S-Corporation. I believe that the nature of the business is such that it cannot be said to have any "fair market value" because it has no assets. I operate the corporation under an agreement with a large insurance company. My contract does not have resale value because of its nature as a personal services contract. Must I report the fair market value for my business on Schedule A-2 of the Form 700?
- A. Yes. Even if there are no tangible assets, intangible assets, such as relationships with companies and clients are commonly sold to qualified professionals. The "fair market value" is often quantified for other purposes, such as marital dissolutions or estate planning. In addition, the IRS presumes that "personal services corporations" have a fair market value. A professional "book of business" and the associated goodwill that generates income are not without a determinable value. The Form 700 does not require a precise fair market value; it is only necessary to check a box indicating the broad range within which the value falls.
- Q. I own stock in IBM and must report this investment on Schedule, 4-1. Jaintially purchased this stock in the early 1990s; however, I am constantly buying and selling shares. Must I note these dates in the "Acquired" and "Disposed" fields?
 - A. No. You must only report dates in the "Acquired" or "Disposed" fields when, during the reporting period, you initially purchase a reportable investment worth \$2,000 or more or when you dispose of the entire investment. You are not required to track the partial trading of an investment.

- Q. On last year's filing I reported stock in Encoe valued at \$2,000 - \$10,000. Late last year the value of this stock fell below and remains at less than \$2,000. How should this be reported on this year's statement?
- A. You are not required to report an investment if the value was less than \$2,000 during the entire reporting period. However, because a disposed date is not required for stocks that fall below \$2,000, you may want to report the stock and note in the "comments" section that the value fell below \$2,000. This would be for informational purposes only; it is not a requirement.
- Q. We have a Section 529 account set up to save money for our son's college education. Is this reportable?
- A. If the Section 529 account contains reportable interests (e.g., common stock valued at \$2,000 or more), those interests are reportable (not the actual Section 529 account). If the account contains solely mutual funds, then nothing is reported.

Income Disclosure

- Q. I reported a business entity on Schedule A-2. Clients of my business are located in several states. Must I report all clients from whom my pro rata share of income is \$10,000 or more on Schedule A-2, Part 3?
- A. No, only the clients located in or doing business on a regular basis in your jurisdiction must be disclosed.
- Q. I believe I am not required to disclose the names of clients from whom my pro rata share of income is \$10,000 or more on Schedule A-2 because of their right to privacy. Is there an exception for reporting clients' names?
- A. Regulation 18740 provides a procedure for requesting energy to allow a client's name not to be disclosed if disclosure of the name would violate a legally recognized privilege under California or Federal law." I his regulation may be obtained from our website at www.fppc.ca.gov. (See Reference Pamphlet, page 14.)

Questions and Answers Continued

Gift Disclosure

- Q. If I received a reportable gift of two tickets to a concert valued at \$100 each, but gave the tickets to a friend because I could not attend the concert, do I have any reporting obligations?
- A. Yes. Since you accepted the gift and exercised discretion and control of the use of the tickets, you must disclose the gift on Schedule D.
- Q. Julia and Jared Benson, a married couple, want to give a piece of artwork to a county supervisor. Is each spouse considered a separate source for purposes of the gift limit and disclosure?
- A. Yes, each spouse may make a gift valued at the gift limit during a calendar year. For example, during 2023 the gift limit was \$590, so the Bensons may have given the supervisor artwork valued at no more than \$1,080. The supervisor must identify Jared and Julia Benson as the sources of the gift.
- Q. I am a Form 700 filer with full disclosure. Our agency holds a holiday raffle to raise funds for a local charity. I bought \$10 worth of raffle tickets and won a gift basket valued at \$120. The gift basket was donated by Doug Brewer, a citizen in our city. At the same event, I bought raffle tickets for, and won a quilt valued at \$70. The quilt was donated by a coworker. Are these reportable gifts?
- A. Because the gift basket was donated by an outside source (not an agency employee), you have received a reportable gift valued at \$110 (the value of the basket less the consideration paid). The source of the gift is Doug Brewer and the agency is disclosed as the intermediary. Because the quilt was donated by an employee of your agency, it is not a reportable gift.

- Q. My agency is responsible for disbursing grants. An applicant (501(c)(3) organization) met with agency employees to present its application. At this meeting, the applicant provided food and beverages. Would the food and beverages be considered gifts to the employees? These employees are designated in our agency's conflict of interest code and the applicant is a reportable source of income under the code.
- A. Yes. If the value of the food and beverages consumed by any one filer, plus any other gifts received from the same source during the reporting period total \$50 or more, the food and beverages would be reported using the fair market value and would be subject to the gift limit.
- Q. I received free admission to an educational conference related to may official duties. Part of the conference fees included a round of golf. Is the value of the golf considered informational material?
- A. No. The value of personal benefits, such as golf, attendance at a concert, or sporting event, are gifts subject to reporting and limits.



CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received

TULARE COUNTY EMPLOYEES

RETIREMENT ASSOCIATION Please type or print in ink. NAME OF FILER (LAST) (MIDDLE) George Edwin 1. Office, Agency, or Court Agency Name (Do not use acronyms) Tulare County Employees Retirement Assoc. - Board of Birectors Division, Board, Department, District, if applicable Your Position Trustee ▶ 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 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) Multi-County X. County of Tular. 3. Type of Statement (Check at least one box) X Annual: The period covered is January 1, 2023, through Leaving Office: Date Left ____ December 31, 2023. (Check one circle.) The period covered is _______, through ☐ The period covered is January 1, 2023, through the date of leaving office. December 31, 2023. The period covered is the date of leaving office. Candidate: Date of Election and office sought, if different than Part 1:_ 4. Schedule Summary (required) ► Total number of pages including this cover page: Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached -or- X None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document) Visalia 93291 TCERA 136 N. AKEVS St. DAYTIME TELEPHONE NUMBER tcera finneye gmail. com (559) 909.2099(c) 713-2900 (B) 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. March 13, 2024 (month, day, year) Date Signed Signature

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

RECEIVED Date Initial Filing Received

Filing Official Use Only

JAN 24 2024

TULARE COUNTY EMPLOYEES' RETIREMENT ASSOCIATION

COVER PAGE A PUBLIC DOCUMENT Please type or print in ink.

NAME OF FIL	ER (LAST)	(FIRST)		(MIDDLE)	
	POLK	NATHAN		JOHN	
1. Office	e, Agency, or Court				
Agency	Name (Do not use acronyms)				
Tular	e County Retirement Agency				
Division	, Board, Department, District, if applicable		Your Position		
Tular	e County Retirement Board		Board Men	nber	
▶ If fili	ng for multiple positions, list below or on	an attachment. (Do not use	e acronyms)		
Agency	/:		Position:		
) luuda	dietien of Office (e				
	diction of Office (Check at least of	ne box)			
Stat	te		Judge, Retired (Statewide Jur		dge, or Court Commissioner
☐ Mul	ti-County		County of T	ulare	
☐ City	of		Other		
3. Type	of Statement (Check at least one	box)			
An	nual: The period covered is January 1, 2	2023, through	Leaving Offi	ice: Date Left	
	December 31, 2023.			(Check one	
	The period covered is/	/, through	of leaving		y 1, 2023, through the date
☐ As	suming Office: Date assumed/_			od covered isof leaving office.	, through
☐ Ca	ndidate: Date of Election	and office sought,	if different than Part 1:		
I. Sche	dule Summary (required)	► Total number	of pages includin	g this cover pag	re:
Sche	dules attached				
	Schedule A-1 - Investments - schedule a	ttached	Schedule C - Income	e, Loans, & Business	Positions - schedule attached
=	Schedule A-2 - Investments - schedule a		Schedule D - Income		
	Schedule B - Real Property - schedule a	ttached	Schedule E - Income	e – Gifts – Travel Pay	ments - schedule attached
-or- 🗌	None - No reportable interests of	n any schedule			
5. Verific	cation				
	ADDRESS STREET s or Agency Address Recommended - Public Document	nt)		STATE	ZIP CODE
1438	Ashland Drive	Lemoo	re	CA	93245
DAYTIME	TELEPHONE NUMBER		EMAIL ADDRESS		
(559) 816-4780		npolk@tularecou		
	used all reasonable diligence in preparing to and in any attached schedules is true and				wledge the information contained
I certify	under penalty of perjury under the law	vs of the State of Californ	ia that the foregoing	is true and correct.	
				//	
Date Si	gned 1-11-24	Si	gnature /	a originally signed some state	ment with your files official \
	(month, day, year)		(File th	e originally signed paper state	ment with your filing official.)

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. CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,000 \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF THIS BUSINESS	MAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: //23	IF APPLICABLE, LIST DATE: //23
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED

Comments:

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	7 7 7 7

ame	Name
ddress (Business Address Acceptable)	Address (Business Address Acceptable)
heck one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one ☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
ENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
AIR MARKET VALUE \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$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 Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
OUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RAT SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499 \$10,001 - \$100,000 \$1,001 - \$10,000	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PROFINE SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499 \$10,001 - \$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	➤ 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
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:	 ▶ 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:
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	➤ 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:
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, if Investment, or Assessor's Parcel Number or Street Address of Real Property Description of Business Activity or	■ 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, if Investment, or Assessor's Parcel Number or Street Address of Real Property Description of Business Activity or
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, if Investment, or Assessor's Parcel Number or Street Address of Real Property	■ 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, if Investment, or Assessor's Parcel Number or Street Address of Real Property
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, 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 FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 DISPOSED	➤ 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, 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 FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 DISPOSED

Comments: _

SCHEDULE B Interests in Real Property (Including Rental Income)

	N
Name	

SSESSOR'S PARCEL NUMBER OR STREET ADDRESS 1438 Ashland Drive	1908 N. Waukena Way		
Lemoore	CITY Hanford		
AIR MARKET VALUE S2,000 - \$10,000 S10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000		
IATURE OF INTEREST	NATURE OF INTEREST		
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement		
Leasehold Other	Leasehold Other		
F 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	10,001 - \$100,000 OVER \$100,000		
SOURCES OF RENTAL INCOME: If you own a 10% or greater nterest, list the name of each tenant that is a single source of ncome of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or great interest, list the name of each tenant that is a single source income of \$10,000 or more.		
None	None		
	N.P L E. L.		
	Nichole Hernandez		
business on terms available to members of the public values of the publi	lending institution made in the lender's regular course of the vithout regard to your official status. Personal loans and less must be disclosed as follows:		
business on terms available to members of the public v	lending institution made in the lender's regular course of without regard to your official status. Personal loans and		
business on terms available to members of the public values of the publi	lending institution made in the lender's regular course of the vithout regard to your official status. Personal loans and less must be disclosed as follows:		
business on terms available to members of the public values of loans received not in a lender's regular course of busin NAME OF LENDER*	lending institution made in the lender's regular course of without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER*		
business on terms available to members of the public value of loans received not in a lender's regular course of busing NAME OF LENDER* ADDRESS (Business Address Acceptable)	lending institution made in the lender's regular course of without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)		
business on terms available to members of the public value of loans received not in a lender's regular course of busing NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	lending institution made in the lender's regular course of without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER		
business on terms available to members of the public valuans received not in a lender's regular course of busing NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) None	lending institution made in the lender's regular course of without regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)		
business on terms available to members of the public values received not in a lender's regular course of busing NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	lending institution made in the lender's regular course of without regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE None None		
business on terms available to members of the public v loans received not in a lender's regular course of busin NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD	lending institution made in the lender's regular course of without regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) ———————————————————————————————————		
business on terms available to members of the public volumes received not in a lender's regular course of busing NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) Mone HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	lending institution made in the lender's regular course of without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000		

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

(Other than Gifts and Travel Payments)

CALIF		
Name		
t. 3		

INCOME RECEIVED	► 1. INCOME RECEIVED
AME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
ulare County Sheriff's Office	Lemoore Nazarene Church
DDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
33 S. Akers, Visalia	D Street Lemoore
USINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
aw Enforcement	
OUR BUSINESS POSITION	YOUR BUSINESS POSITION
Deputy Sheriff	
	GROSS INCOME RECEIVED No Income - Business Position Or
	□ \$500 - \$1,000 □ \$1,001 - \$10,000
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000	10,001 - \$100,000 OVER \$100,000
ONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary 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 mo
(Describe)	(Describe)
	Other
Other(Describe) 2 LOANS RECEIVED OR OUTSTANDING DURING THE REPORTIN	Other(Describe)
Other	Other (Describe) Cial lending institution, or any indebtedness created as part in the lender's regular course of business on terms available cial status. Personal loans and loans received not in a lender lows: INTEREST RATE TERM (Months/Years)
* You are not required to report loans from a commerce a retail installment or credit card transaction, made it to members of the public without regard to your office regular course of business must be disclosed as follows:	cial lending institution, or any indebtedness created as part in the lender's regular course of business on terms available cial status. Personal loans and loans received not in a lender lows:
* You are not required to report loans from a commerce a retail installment or credit card transaction, made it to members of the public without regard to your office regular course of business must be disclosed as followed. NAME OF LENDER*	Other
* You are not required to report loans from a commerce a retail installment or credit card transaction, made it to members of the public without regard to your office regular course of business must be disclosed as followed. NAME OF LENDER* Acura	Other
* You are not required to report loans from a commerce a retail installment or credit card transaction, made it to members of the public without regard to your office regular course of business must be disclosed as followed. NAME OF LENDER* Acura	Other
* You are not required to report loans from a commerce a retail installment or credit card transaction, made it to members of the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business acceptable)	Other
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTIN * You are not required to report loans from a commerce a retail installment or credit card transaction, made in to members of the public without regard to your office regular course of business must be disclosed as followed as	Other
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING * You are not required to report loans from a commerce a retail installment or credit card transaction, made in to members of the public without regard to your office regular course of business must be disclosed as followed as	Other
* You are not required to report loans from a commerce a retail installment or credit card transaction, made in to members of the public without regard to your office regular course of business must be disclosed as follows. **NAME OF LENDER** **Acura** ADDRESS (Business Address Acceptable) **BUSINESS ACTIVITY, IF ANY, OF LENDER** HIGHEST BALANCE DURING REPORTING PERIOD **\$\[\] \$500 - \$1,000	Other
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTIN * You are not required to report loans from a commerce a retail installment or credit card transaction, made in to members of the public without regard to your office regular course of business must be disclosed as followed as followed as followed by the public of the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business and the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business and the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business and the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followed by the public without regard to your office regular course of business must be disclosed as followe	Other
* You are not required to report loans from a commerce a retail installment or credit card transaction, made in to members of the public without regard to your office regular course of business must be disclosed as follows. **NAME OF LENDER** **Acura** ADDRESS (Business Address Acceptable) **BUSINESS ACTIVITY, IF ANY, OF LENDER** HIGHEST BALANCE DURING REPORTING PERIOD **\$\[\] \$500 - \$1,000	Other

SCHEDULE D Income – Gifts

CALIFORNIA FORM FAIR POLITICAL PRACTICES	700 COMMISSION
Name	

NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
DDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
USINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
ATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
<u></u>	
<u></u>	
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

SCHEDULE E Income - Gifts Travel Payments, Advances, and Reimbursements

CALIFO	ORNIA F	ORM	70	00
	TICAL PRAC			
Name		Tall a		
			VI. I	

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.

NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):// AMT: \$	DATE(S):
MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: Gift -or- Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
If Gift, Provide Travel Destination	▶ If Gift, Provide Travel Destination
NAME OF SOURCE (Not an Acronym)	▶ NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOUR
DATE(S):	DATE(S):/
(If gift) MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
MUST CHECK ONE: Gift -or- Income Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

DEALINE

A PUBLIC DOCUMENT

Date Initial Filing Received
MAR 19 2024
TULARE COUNTY EMPLOYEES

Please type or p					RETIREMENT ASSOCIATIO
NAME OF FILER (L	AST) (FIRST)			(MIDDLE)	
Vander Poel	Pete			J.	
1. Office, Age	ency, or Court				
Agency Name	(Do not use acronyms)				
County of	Tulare				
Division, Board	d, Department, District, if applicable		Your Posit	ion	
Board of S	upervisors		District	2	
	multiple positions, list below or on an attachment	. (Do not use			
Agency: SEI	E ATTACHED LIST		Position:		
2 Jurisdictio	on of Office (Check at least one box)	33			
	on of other (check at least one box)				
State				Retired Judge, Pro Tem le Jurisdiction)	Judge, or Court Commissioner
Multi-Coun	ty		County of the country of th	f Tulare	
City of			Other _		
3. Type of S	tatement (Check at least one box)				
	The period covered is January 1, 2023, through December 31, 2023.		Leaving		ne circle.)
	The period covered is	, through			uary 1, 2023, through the date
Assuming	Office: Date assumed/		○ The	period covered is date of leaving office.	/, through
☐ Candidate	e: Date of Election and	office sought,	if different than P	art 1:	
4. Schedule	Summary (required) ► Tota	al number	of pages inclu	uding this cover p	age:
Schedules	s attached				
Schedu	ule A-1 - Investments - schedule attached	×	Schedule C - In	come, Loans, & Busine	ess Positions - schedule attached
☐ Schedu	Ile A-2 - Investments - schedule attached				le attached
Schedu	Ile B - Real Property - schedule attached		Schedule E - Inc	come – Gifts – Travel F	Payments - schedule attached
or D Non	O No was and a left in the works are a second	7.7.			
-or-	e - No reportable interests on any sche	aule			
MAILING ADDRES		CITY		STATE	710 0005
	cy Address Recommended - Public Document)			SIAIE	ZIP CODE
DAYTIME TELEPH	urrel Avenue	Visalia	=	CA	93291
	6-5000		EMAIL ADDRESS	Otologo	
200 CO	reasonable diligence in preparing this statement.			@tularecounty.ca	
herein and in a	any attached schedules is true and complete. I a	icknowledge t	his is a public doc	cument.	triowledge the information contained
I certify under	penalty of perjury under the laws of the Stat	e of Californi	ia that the forego	oing is true and corre	et.
Date Signed	3/14/24	Sig	gnature	XL	
-	(month, day, year)		The state of the s	File the originally signed paper s	tatement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS COVER PAGE ATTACHMENT

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Pete Vander Poel

EXPANDED STATEMENT LIST

Agency Name	Division, Board, Department, District	Position or Title	Jurisdiction	Type of Statement	Period Covered
Kings/Tulare Area Agency on Aging	Kings/Tulare Area Agency on Aging	Board Member	Multi-county Tulare &	Annual	01/01/23 - 12/31/23
San Joaquin Valley Insurance Authority	San Joaquin Valley Insurance Authority	Board Member	Multi-county Tulare & Fresno	Annual	01/01/23 - 12/31/23
Greater Kaweah Groundwater Sustainability Agency	Greater Kaweah Groundwater Sustainability Agency	Board Member	Multi-county Tulare & Kings	Annual	01/01/23 - 12/31/23
County of Tulare	In-Home Supportive Services Public Authority	Director	County of Tulare	Annual	01/01/23 - 12/31/23
County of Tulare	Public Finance Authority	Director	County of Tulare	Annual	01/01/23 - 12/31/23
County of Tulare	Terra Bella Sewer Maintenance District	Director	County of Tulare	Annual	01/01/23 - 12/31/23
County of Tulare	Tulare County Association of Governments	Regular Member	County of Tulare	Annual	01/01/23 - 12/31/23
Local Agency Formation Commission (LAFCO)	Local Agency Formation Commission	Regular Member	County of Tulare	Annual	01/01/23 - 12/31/23
Tulare County Transportation Authority (Measure R)	Tulare County Transportation Authority (Measure R)	Board Member	County of Tulare	Annual	01/01/23 - 12/31/23
County of Tulare	Flood Control District	Board of Supervisors Member	County of Tulare	Annual	01/01/23 - 12/31/23
First 5 Commission	First 5 Commission	Board of Supervisors	County of Tulare	Annual	01/01/23 - 12/31/23
County of Tulare	Water Commission	Board of Supervisors	County of Tulare	Annual	01/01/23 - 12/31/23
County of Tulare	Employees Retirement Board	Member 9 - Board of Supervisors	County of Tulare	Annual	01/01/23 - 12/31/23
County of Tulare	Public Facilities Corporation	Board of Supervisors Member	County of Tulare	Annual	01/01/23 - 12/31/23
Eastern Tule Groundwater Sustainability Agency	Eastern Tule Groundwater Sustainability Agency	Alternate Member	County of Tulare	Annual	01/01/23 - 12/31/23

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. CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Pete Vander Poel

	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
	CVB Financial Corporation		
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS	
		GENERAL DESCRIPTION OF THIS BUSINESS	
	Stock Investment		
	FAIR MARKET VALUE	FAIR MARKET VALUE	
	× \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000	
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000	
	NATURE OF INVESTMENT		
	NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT	
	(Describe)	Stock Other(Describe)	
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499	
	☐ Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Rep	oort on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED	
_			
	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS	
	FAIR MARKET VALUE	FAIR MARKET VALUE	
	\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000	
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000	
	NATURE OF INVESTMENT	NATURE OF INVESTMENT	
	Stock Other (Describe)	Stock Other(Describe)	
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499	
	O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Rep	ort on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
	00		
	ACQUIRED DISPOSED	ACQUIRED DISPOSED	
_	NAME OF BUSINESS ENTITY	NAME OF BUILDINGS FUTITY	
	NAME OF BOSINESS ENTITY	► NAME OF BUSINESS ENTITY	
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS	
	FAIR MARKET VALUE	FAIR MARKET VALUE	
	\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000	
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000	
		AND	
	NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT	
	(Describe)	Stock Other (Describe)	
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499	
	○ Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Rep.	ort on Schedule C)
	IE ADDI ICADI E LICE DATE:		
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
		, , 23 , , 23	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED	
	1	to being report with	
_			
CO	omments:		

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name

Pete Vander Poel

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
2865 E. Oakdale Avenue	315 E. Main Street
CITY	CITY
Tulare, CA 93274	Visalia, CA 93291
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 X Over \$1,000,000
NATURE OF INTEREST X Ownership/Deed of Trust Easement	NATURE OF INTEREST X Ownership/Deed of Trust
Leasehold	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$50 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 X 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. X None	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 Provence Salon; Kaweah Delta Health Care
	al lending institution made in the lender's regular course of
business on terms available to members of the public loans received not in a lender's regular course of bus	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:
business on terms available to members of the public	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and
business on terms available to members of the public loans received not in a lender's regular course of bus	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of bus	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* ADDRESS (Business Address Acceptable)	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	al lending institution made in the lender's regular course of 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
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	al lending institution made in the lender's regular course of 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 INTEREST RATE TERM (Months/Years)
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) None	al lending institution made in the lender's regular course of 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 Whone
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	al lending institution made in the lender's regular course of 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 INTEREST RATE TERM (Months/Years) Mone HIGHEST BALANCE DURING REPORTING PERIOD
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	al lending institution made in the lender's regular course of 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 INTEREST RATE TERM (Months/Years)
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	al lending institution made in the lender's regular course of 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) HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES	COMMISSION

Name

Pete Vander Poel

► ASSE	SSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
417	91 Robin Rd	
CITY		CITY
Sha	ver Lake, CA 93644	
\$2 \$1 X \$1	MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATL	RE OF INTEREST	NATURE OF INTEREST
X O	vnership/Deed of Trust	Ownership/Deed of Trust Easement
		Leasehold Description Other
IF RE	NTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$	- \$499	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
\$1	0,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
intere	CCES OF RENTAL INCOME: If you own a 10% or greater st, list the name of each tenant that is a single source of the 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.
y		None
* You busi loan	ness on terms available to members of the public of second potential in a lender's regular course of busing	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and
* You busi loan	ness on terms available to members of the public	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and
* You busi loan	ness on terms available to members of the public of second potential in a lender's regular course of busing	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:
* You busi loan NAME	ness on terms available to members of the public of seceived not in a lender's regular course of busing of LENDER*	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:
* You busi loan NAME ADDR	ness on terms available to members of the public of seceived not in a lender's regular course of busing of LENDER* ESS (Business Address Acceptable)	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
* You busi loan NAME ADDR	ness on terms available to members of the public of seceived not in a lender's regular course of busing of Lender* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER EST RATE TERM (Months/Years) None	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
* You busi loan NAME ADDR BUSIN INTER	ness on terms available to members of the public of series received not in a lender's regular course of busing of Lender* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER EST RATE TERM (Months/Years)	cial lending institution made in the lender's regular course of c 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 INTEREST RATE TERM (Months/Years)
* You busi loan NAME ADDR BUSIN INTER HIGHE \$55	ness on terms available to members of the public of sereceived not in a lender's regular course of busing of Lender* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER EST RATE TERM (Months/Years) None EST BALANCE DURING REPORTING PERIOD	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER*
* You busi loan NAME ADDR BUSIN HIGHE \$51	ness on terms available to members of the public of received not in a lender's regular course of busing of Lender* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER EST RATE TERM (Months/Years) Whone EST BALANCE DURING REPORTING PERIOD 100 - \$1,000	cial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER*
* You busi loan NAME ADDR BUSIN HIGHE \$51	ness on terms available to members of the public of seceived not in a lender's regular course of busing of Lender* OF LENDER* ESS (Business Address Acceptable) ESS ACTIVITY, IF ANY, OF LENDER EST RATE TERM (Months/Years) None EST BALANCE DURING REPORTING PERIOD 100 - \$1,000	sial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER*

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

(Other than Gifts and Travel Payments)

	ORNIA FORM 700 LITICAL PRACTICES COMMISSION
Name	
	Pete Vander Poel

NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Armstrong Property Management	Vander Poel and Company
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
7046 W. Pershing Ct. Visalia, CA 93291	2865 E. Oakdale Avenue, Tulare, CA 93274
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Property Management	Real Estate
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Owner	President
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
▼ \$10,001 - \$100,000 □ OVER \$100,000	\$10,001 - \$100,000 X 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.)	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.)
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 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:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	% None
ADDRESS (Business Address Acceptable)	_
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	C#.
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
— * ******* **************************	_
OVER \$100,000	
OVER \$100,000	Other(Describe)
OVER \$100,000 Comments:	

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

	ORNIA FORM 700 LITICAL PRACTICES COMMISSION
Name	a record of the second
	Pete Vander Poel

NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
	NAME OF SOURCE OF INCOME
VPZ, LLC ADDRESS (Business Address Acceptable)	ADDRESS (Durings Address Associate)
	ADDRESS (Business Address Acceptable)
7046 W. Pershing Ct., Visalia, CA 93291 BUSINESS ACTIVITY, IF ANY, OF SOURCE	PURINESS ASTRUCTIVE ANY OF SOURCE
	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Property Services	VOUR BUSINESS BOOKERY
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Owner	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Onl
\$500 - \$1,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary 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)
X Other Owner Withdrawal	Other
(Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	(Describe)
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)
ADDRESS (Dustiness Address Assessable)	%
ADDRESS (Business Address Acceptable)	OF CURITY FOR LOW
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	
	City
\$10,001 - \$100,000	
	Guarantor
OVER \$100,000	Guarantor
OVER \$100,000	Other
OVER \$100,000	



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

RECEIVE 2 Only

MAR 13 2024

Please type or print in ink. NAME OF FILER (LAST) (MIDDLE)TULARE COUNTY EMPLOYEES RETIREMENT ASSOCIATION 1. Office, Agency, or Court Agency Name (Do not use acronyms) COURT / RAPLOYERS PETIERMENT SYSTEM

Penartment District. if applicable Your Position Division, Board, Department, District, if appl RUSTER ▶ 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 City of Other 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through Leaving Office: Date Left _____/_ December 31, 2023. (Check one circle.) -or-The period covered is _______, through ☐ The period covered is January 1, 2023, through the date of leaving office. December 31, 2023. Assuming Office: Date assumed ____/___/_ ☐ The period covered is ___ the date of leaving office. Candidate: Date of Election __ and office sought, if different than Part 1: __ 4. Schedule Summary (required) ▶ 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 -or- None - No reportable interests on any schedule 5. Verification MAILING ADDRESS (Business or Agency Address Recommended - Public Document) 136 N. AKERS DAYTIME TELEPHONE NUMBER 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 (File the originally signed paper statement with your filing official.)

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.

	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
3	HILL, ROLAND P.		

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
AMAZON	BANK OF THE SIERRA
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Connercial RETAIL /E-TAIL	BANKING
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$\notin \$10,000 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NĄTURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership Income Received of \$0 - \$499	(Describe) Partnership Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
VE 4001101015 1107 017	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u> </u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
CENTRAL VALLEY BINSINESS DANK	HEROULES CAPITAL
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
BANKING	BANKING
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	X \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other
Partnership Income Received of \$0 - \$499	(Describe) Partnership Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	☐ Income Received of \$500 or More (Report on Schedule C)
a .	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	//23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
J.M. SMUCKER INC	State
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS BUSINESS
FOOD MANUFACTURING	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)	☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
11 / 8 /23 / /23	/ /23 / /23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
'	
Comments:	

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION Hill, Rolano P.

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
2642 W. HARTER AVE	
CITY	CITY
VISALIA	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
\$10,001 - \$100,000//23//23	\$10,001 - \$100,000//23//23
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold Other	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	\$10,001 - \$100,000 OVER \$100,000
	COURCES OF RENTAL INCOME. If you own a 100/ or supple
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that 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.	income of \$10,000 or more.
None	None
* `	
	al lending institution made in the lender's regular course of
loans received not in a lender's regular course of busi	without regard to your official status. Personal loans and
loans received not in a lender's regular course of busi	ness must be disclosed as follows.
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
, and a second s	discharación de la Marchina de Marchina de la Constante de Constante de Constante de Marchina de Constante de Marchina de Constante de
DURING A ACTIVITY IS ANY OF LENDED	BUSINESS ACTIVITY, IF ANY, OF LENDER
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% None	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
	\$10,001 - \$100,000 OVER \$100,000
S10,001 - \$100,000 OVER \$100,000	
Guarantor, if applicable	Guarantor, if applicable
-	
Comments:	

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Date Initial Filing Received DEC 2 1 2023

A PUBLIC DOCUMENT

RECEIVED

Please type or print in ink.	AFUL	DUCUMENT	TULARE COUNTY EMPLOY RETIREMENT ASSOCIATI
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Morgan	Thomas		Wyatt
. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
Tulare County Employee Retirement A	gency		
Division, Board, Department, District, if applicable		Your Position	
Board		Trustee	
▶ If filing for multiple positions, list below or on ar	n attachment. (Do not use		
Agency:		Position:	
Jurisdiction of Office (Check at least on			
State	,	Undae Petired Judge I	Pro Tom Judgo or Court Commission
		(Statewide Jurisdiction)	Pro Tem Judge, or Court Commissioner
Multi-County		County of Tulare	
City of		(E-1)	
Type of Statement (Check at least one be			
		/	
Annual: The period covered is January 1, 20. December 31, 2022.	22, through		Left// (Check one circle.)
-or- The period covered is/	/ theoryale		is January 1, 2022, through the date of
December 31, 2022.	/, inrough	leaving office,	1 is varidary 1, 2022, through the date of
Assuming Office: Date assumed 11 / 15	5 , 23	•0F-	d is, through
Assuming Office. Date assumed		the date of leaving	
Candidate: Date of Election	and office sought,	if different than Part 1:	
Schedule Summary (required)	► Total number	of pages including this c	over page:
Schedules attached			
Schedule A-1 - Investments - schedule atta	ached	Schedule C - Income, Loans, &	& Business Positions - schedule attached
Schedule A-2 - Investments - schedule atta	ached	Schedule D - Income - Gifts -	schedule attached
Schedule B - Real Property - schedule atta	ached	Schedule E - Income - Gifts -	Travel Payments - schedule attached
Or- 🔳 None - No reportable interests on	any schedule		
Verification			
MAILING ADDRESS STREET	CITY	ST	ATE ZIP CODE
(Business or Agency Address Recommended - Public Document) 136 N Akers St	Visalia	Ca	02204
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	93291
(559) 713-2900		into Otularecount	h 61 001
I have used all reasonable diligence in preparing this herein and in any attached schedules is true and co	statement, I have review	red this statement and to the bes	
I certify under penalty of perjury under the laws			d correct.
10111100		A.	1
Date Signed 12/14/23 (month, day, year)	Sig	inature May	

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.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
Name Thomas Morgan		

► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C.
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED J22 DISPOSED
Comments: No investments	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name

Thomas Morgan

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Name	News
	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2 GENERAL DESCRIPTION OF THIS BUSINESS
	SENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 J_22 J22 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000	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 Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	► 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	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 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 or Names listed below	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:	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
INVESTMENT REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of 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	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 FAIR MARKET VALUE IF APPLICABLE, LIST DATE: 22 ACQUIRED DISPOSED	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 J_22 J22 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
comments: I don't own a business or	[CEIVE IN OME FOR GAY] FPPC Form 700 - Schedule A-2 (2022/2023 advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Thomas Morgan

CITY	CITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED
You are not required to report loans from a commerc business on terms available to members of the publi loans received not in a lender's regular course of bu	sial lending institution made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:
business on terms available to members of the publi	c without regard to your official status. Personal loans and
business on terms available to members of the publi loans received not in a lender's regular course of bu	c without regard to your official status. Personal loans and siness must be disclosed as follows:
Dusiness on terms available to members of the publicans received not in a lender's regular course of but the publicans of Lender* ADDRESS (Business Address Acceptable)	c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER*
Dusiness on terms available to members of the publicans received not in a lender's regular course of business of LENDER*	c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
Dusiness on terms available to members of the publicans received not in a lender's regular course of business of the publicans received not in a lender's regular course of business (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	c 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
Dusiness on terms available to members of the publicans received not in a lender's regular course of business Address Acceptable) DUSINESS (Business Address Acceptable) DUSINESS ACTIVITY, IF ANY, OF LENDER TERM (Months/Years) None IIGHEST BALANCE DURING REPORTING PERIOD	c 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 INTEREST RATE TERM (Months/Years)
Dusiness on terms available to members of the publicans received not in a lender's regular course of business (Business Address Acceptable) BUSINESS (Business Address Acceptable) TERM (Months/Years) Whose Who	c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
Dusiness on terms available to members of the publicans received not in a lender's regular course of business Address Acceptable) DUSINESS (Business Address Acceptable) DUSINESS ACTIVITY, IF ANY, OF LENDER TERM (Months/Years) None IIGHEST BALANCE DURING REPORTING PERIOD	c without regard to your official status. Personal loans and siness must be disclosed as follows: NAME OF LENDER*

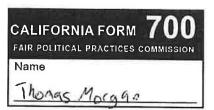
SCHEDULE C Income, Loans, & Business **Positions**

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
Thomas Morgan	ľ

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	
SOURCE ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No locome - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	Classes at the Control of the Contro
\$10,001 - \$100,000 OVER \$100,000	\$1,001 - \$10,000 \$1,001 - \$10,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	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. boal, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list cach source of \$10,000 or more
(Describe)	(Describe)
Other	
(Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	ERIOD
a retail installment or credit card transaction, made in th	lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
	Other
T	(Describe)
Comments: I am a government employe	e, no income froma business

SCHEDULE D Income - Gifts



NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
\$	\$
\$	
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	s
1 1 6	

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Thomas Morgan

- · Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.

· For gifts of travel, provide the travel destination.

NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S)://	DATE(S):
MUST CHECK ONE: Gift -or- Income	▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
▶ If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):	DATE(S)://
► MUST CHECK ONE: ☐ Gift -or- ☐ Income	► MUST CHECK ONE: Gift -or- Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
► If Glft, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments: Sometimes in the course of	ny regular employment I am comprensutes
for travel to cover a library shift	



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date MAR 12119g 2024 ived

TULARE COUNTY EMPLOYEES'
RETIREMENT ASSOCIATION

Please type or print in ink.	
NAME OF FILER (LAST) (FIRST)	(MIDDLE)
Inman, Bryan Ty	
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
Tulare County Employee Ros	ticement A cropia tion
Tylare County Employee Re- Division, Board, Department, District, if applicable	Your Position
	Your Position
► If filing for multiple positions, list below or on an attachment. (Do not u	
I ming for manuple positions, list below or on an attachment. (Do not t	ise actionyms)
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 Tylore
City of	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2023, through December 31, 2023.	Leaving Office: Date Left//(Check one circle.)
-or-	
The period covered is/, through December 31, 2023.	of leaving office.
Assuming Office: Date assumed/	-or- The period covered is/, through
Assuming Office. Date assumed	the date of leaving office.
Candidate: Date of Election and office sough	ht, if different than Part 1:
	er 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
-or- None - No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
681 W. Belleview Ave. Porte	CV.110, CA 93757
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS
(559) 920-5236	tyinman avahoc. com
I have used all reasonable diligence in preparing this statement. I have rev herein and in any attached schedules is true and complete. I acknowledg	viewed this statement and to the best of my knowledge the information contained be this is a public document.
I certify under penalty of perjury under the laws of the State of California	ornia that the foregoing is true and correct.
-1 -1	
Date Signed 3/29/2024	Signature B
(month day year)	(File the originally signed paper statement with your filing official.)