## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received

Please type or print in ink.

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NAME OF FILER (LAST)  LEVEL EVEN (FIRST)  VIII	(MIDDLE)
1. Office, Agency, or Court	)
Agency Name (Do not use acronyms)	
Division, Board, Department, District, if applicable	Your Position
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▶ If filing for multiple positions, list below or on an attachment. (Do no	
Accorde	Position;
Agaity.	POSIUO/I,
2. Jurisdiction of Office (Check at least one box)	
State	<ul> <li>Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)</li> </ul>
Multi-County	County of Rincy
City of	(Statewide Jurisdiction)  County of
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2021, through December 31, 2021.	Leaving Office: Date Left/(Check one circle.)
The period covered is	igh The period covered is January 1, 2021, through the date of leaving office.
Assuming Office: Date assumed	The period covered is/, through the date of leaving office.
Candidate: Date of Election (13-22 and office so	ought, if different than Part 1:
	ber of pages including this cover page:
Schedules attached	
Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions – 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	Solidate 2 moons one major synone saleste attacks
-or-None - No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS STREET CITY	Y STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)	antard Co. 932-80
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS
	K-Inderson (uzzmoul an
I have used all reasonable diligence in preparing this statement. I have herein and in any attached schedules is true and complete. I acknowle	reviewed this statement and to the best of my knowledge the information contained edge this is a public document.
I certify under penalty of perjury under the laws of the State of Ca	
0000	
Date Signed 8 V CC	Signature
(monlh, day, year)	(File the oughally signed paper statement with your filing official.)