CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

Date Initial Filing Received

JUL 29 2022

Ple	ease type or print in ink.							
ΝA	ME OF FILER (LAST)	(F(RST)			(MIDDLE)	KINGS COUNTY ELECT	TONS	
	Hoopea	GAY			Lynne			
1.	Office, Agency, or Court	,					_	
	Agency Name (Do not use acronyms)		-					
	Bornd Member-Area 2							
	Division, Board, Department, District, if		Your Position					
LAKESIDE UNION Elementary School District BOARD Member								
	➤ If filling for multiple positions, list below or on an attachment. (Do not use acronyms)							
- ··								
	gency:			Position:				
2.	urisdiction of Office (Check at least one box)							
	∏ State			☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner				
				(Statewide Jurisdiction)				
	Multi-County			County of	King s			
	City of			Other			_	
_			······································					
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/				
	-or- The period covered is/, through			☐ The period covered is January 1, 2021, through the date of				
	December 31, 2021.		, illiougii	leaving off		.,,		
	Assuming Office: Date assumed		The period covered is/					
	_		the date of leaving office.					
	Candidate: Date of Election	Candidate: Date of Election						
4.	Schedule Summary (must complete) ► Total number of pages including this cover page:							
	Schedules attached	10	tui nuimbei e	n pages moraume	, and cover pag			
			lle attached Schedule C - Income, Loans, & Business Positions schedule attached					
	Schedule A-1 - Investments - : Schedule A-2 - Investments - :		Schedule D - Income - Gifts - schedule attached					
	Schedule B - Real Property - s	Schedule E - income Gifts Travel Payments schedule attached						
		Jonesia anasiis						
-(or- None - No reportable in	terests on any sch	edule					
5.	Verification					<u>Consideration of the second o</u>	anne est	
	MAILING ADDRESS STREET	rhlia Dagumanti	CITY		STATE	ZIP CODE		
	(Business or Agency Address Recommended - Pu	one Document)	HANFE	d	CA	93,230		
	DAYTIME TELEPHÔNE NUMBER			EMAIL ADDRESS			_	
ghoppen 60 @ cleft						· Com	_	
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information herein and in any attached schedules is true and complete. I acknowledge this is a public document.							đ	
	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.							
	Date Signed 7/29/20	7.1.	Sig	nature,-	originally signed paper states	neat with your filling official 1		
	(morning day, ye	-9		D (LIID 119		mar year many emorany		