

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Invine Filipp Received

JUL 2 8 2022

Please type or print in ink.					
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	CHARLE COMMAN EFFECTIONS	
Hubern165	Sandr	c-	Lois		
1. Office, Agency, or					
Agency Name (Do not a		4			
Lemoure Un Division, Board, Departm	ent, District, if applicable	istrict, Boa Your Positi	<u>NCD</u> Ion		
4	on 1		rd Meaber		
	sitions, list below or on an attachment.		ca man ver		
	·				
Agency:		Position: _			
2. Jurisdiction of O	ffice (Check at least one box)				
State		-	tetired Judge, Pro Tem Judg e Jurisdiction)	e, or Court Commissioner	
Multi-County		County o	Kings		
	0012		,		
	nt (Check at least one box)			<u></u>	
Annual: The period	d covered is January 1, 2021, through 31, 2021.	Leaving	g Office: Date Left/_ (Check one cl	/	
	d covered is/	_, through ☐ The leavi	period covered is January 1 ing office.		
Assuming Office:	Date assumed//	The	period covered is/_ date of leaving office.	, through	
Candidate: Date o	f Election <u>//- 8 - 2022</u> and o	ffice sought, if different than P	art 1:		
1 Sahadula Summa	must complete	l manufacturation in the land	udlan the same		
4. Schedule Summa Schedules attac	- '	l number of pages inclu	iding this cover page		
Schedule A-1 -	Investments – schedule attached	Schedule C - In	icome, Loans, & Business P	Positions – schedule attached	
	Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached				
Schedule B - Re	eal Property – schedule attached	Schedule E - In	come – Gifts – Travel Paym	nents - schedule attached	
-or- None - No	reportable interests on any sched	iulo			
5. Verification	aportable interests on any serious		NALIZACIO CONTROLO CONTROLO CONTROLO CONTROLO CARRONA CONTROLO CONTROLO CONTROLO CONTROLO CONTROLO CONTROLO CO	HETSELECTSTOWN TO THE CHARLES THIS HAVE BEEN CHARLES FOR HELD CHARLES FOR THE CHARLES FROM CHARLES FOR CHARLES	
MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE	
(Bysiness or Adency Address i	Recommended - Public Document)	1	CA.	93246	
DAYTIME TELEPHONE NUMB	ER	FEMAL ADDRESS	(14)	93245	
	le diligence in preparing this statement. ed schedules is true and complete. I ar			ledge the information contained	
I certify under penalty	of perjury under the laws of the State	of California that the forego	oing is true and correct.		
Date Signed 🤭 -	28-2020	Signature			
	78-2032 (month, day, year)	2.8	(File the originally signed paper stateme	ent with your filing official.)	