

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Levinson Jeffrey Laurence

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
West Hills Community College District
Division, Board, Department, District, if applicable Your Position
Trustee, Area 7

► 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 Fresno, Kings, etc. County of _____
 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- (Check one circle.)
The period covered is ____/____/_____, through The period covered is January 1, 2021, through the date of leaving office.
 Assuming Office: Date assumed ____/____/_____. -or-
 The period covered is ____/____/_____, through the date of leaving office.
 Candidate: Date of Election 11.1.22 and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► 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 STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
Hanford CA 93230
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
levinson@griswoldlasalle.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 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 7.18.22 Signature _____
(month, day, year) (file the originally signed paper statement with your filing official.)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

NAME OF INDIVIDUAL (U)
 NAME OF TRUST, ESTATE, OR OTHER ENTITY
 Name
 Jeffrey L. Levinson

Jeffrey L. Levinson, Inc.
 Name
 [REDACTED] E. Seventh Street, Hanford, CA 93230
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
 Professional Law Corporation

FAIR MARKET VALUE **IF APPLICABLE, LIST DATE:**
 \$0 - \$1,000
 \$2,000 - \$10,000 / / 19 / / 19
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION Partner-Attorney

IDENTIFY THE SOURCE OF INVESTMENT INCOME (YOUR PROPERTY OR OTHER INVESTMENT)
 \$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

IDENTIFY THE TYPE OF INVESTMENT PROPERTY (YOUR PROPERTY OR OTHER INVESTMENT)
 None or Items listed below
Attorney Client Privilege

IDENTIFY THE TYPE OF INVESTMENT PROPERTY (YOUR PROPERTY OR OTHER INVESTMENT)
 Check one box
 INVESTMENT REAL PROPERTY
 N/A

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 / / 19 / / 19
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold Yrs. remaining Other

Check box if additional schedules reporting investments or real property are attached

Comments: _____

Jeffrey L. Levinson, Inc. II
 Name
 [REDACTED] C Street, Lemoore, CA 93245
 Address (Business Address Acceptable)
 Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
 Real Estate Sales/Property Management

FAIR MARKET VALUE **IF APPLICABLE, LIST DATE:**
 \$0 - \$1,999
 \$2,000 - \$10,000 / / 19 / / 19
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Shareholder Other

YOUR BUSINESS POSITION President/CEO/Broker

IDENTIFY THE SOURCE OF INVESTMENT INCOME (YOUR PROPERTY OR OTHER INVESTMENT)
 \$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

IDENTIFY THE TYPE OF INVESTMENT PROPERTY (YOUR PROPERTY OR OTHER INVESTMENT)
 None or Items listed below
Jeffrey L. Levinson, Inc. II

IDENTIFY THE TYPE OF INVESTMENT PROPERTY (YOUR PROPERTY OR OTHER INVESTMENT)
 INVESTMENT REAL PROPERTY
 [REDACTED] C Street, Lemoore, CA 93245

Name of Business Entity, if investment, or Assessor's Parcel Number or Street Address of Real Property
 See above.
 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 / / 19 / / 19
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold Yrs. remaining Other MONTH TO MONTH

Check box if additional schedules reporting investments or real property are attached

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

STATE OF CALIFORNIA
 FPPC FORM 700
 PUBLIC OFFICER AND CANDIDATE FINANCIAL DISCLOSURE

Name
 Jeffrey L. Levinson

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 [Redacted] C Street

CITY
 Lemoore, CA 93245

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / 19 DISPOSED / 19

NATURE OF INTEREST
 Ownership/Deed of Trust
 Leasehold
 Easement
 Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$0 - \$499
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
 None
 Jeffrey L. Levinson, Inc. dba Heritage Realtors and Property Management

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 [Redacted] Cherry Lane

CITY
 Lemoore, CA 93245

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / 19 DISPOSED / 19

NATURE OF INTEREST
 Ownership/Deed of Trust
 Leasehold
 Easement
 Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$0 - \$499
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
 None
 Names unknown - Property Management Co.

* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF LENDER
 INTEREST RATE _____ TERM (Months/Years)
 _____ % None
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER*
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF LENDER
 INTEREST RATE _____ TERM (Months/Years)
 _____ % None
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments:

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 [REDACTED] Mallard Avenue

CITY
 Lemoore, CA

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000 6 / 8 / 21 / / 21
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

NATURE OF INTEREST
 Ownership/Deed of Trust | Easement
 Leasehold _____
 Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
 None
 Names unknown - Property Management Company

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
 [REDACTED] Lincoln Place

CITY
 Lemoore

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000 11 / 30 / 21 / / 21
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

NATURE OF INTEREST
 Ownership/Deed of Trust | Easement
 Leasehold _____
 Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
 None
 Was not rented until 2.1.22

* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE TERM (Months/Years)
 _____ % None _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

INTEREST RATE TERM (Months/Years)
 _____ % None _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

Print **Clear**

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CELEBRATING FORM 700
 2019-2020
 Name
 Jeffrey L. Levinson

NAME OF SOURCE OF INCOME
 Jeffrey L. Levinson, Inc.

ADDRESS (Business Address Acceptable)
 East Seventh Street, Hanford CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Professional Law Corporation

YOUR BUSINESS POSITION
 Partner-Attorney

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 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.)
 Sale of _____
 (Real property, car, boat, etc.)
 Loan repayment
 Commission or Rental Income, list each source of \$10,000 or more

 (Describe)
 Other _____
 (Describe)

NAME OF SOURCE OF INCOME
 Jeffrey L. Levinson, Inc. II

ADDRESS (Business Address Acceptable)
 C Street, Lemoore, CA 93245

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Real Estate & Property Management

YOUR BUSINESS POSITION
 President/CEO/Broker

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 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.)
 Sale of _____
 (Real property, car, boat, etc.)
 Loan repayment
 Commission or Rental Income, list each source of \$10,000 or more

 (Describe)
 Other Also Misc. Income _____
 (Describe)

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

INTEREST RATE _____ % None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
 Street address _____
 City _____
 Guarantor _____
 Other _____
 (Describe)

Comments: _____

