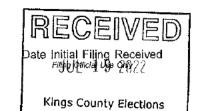
CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT



Ple	ease type or print in ink.	
NΑ	ME OF FILER (LAST) (FIRST)	(MIDDLE)
_	MALDONADO SILVIA	
1.	Office, Agency, or Court	
	Agency Name (Do not use acronyms)	
	KEITLEMAN CITY COMMUNITY	SERVICES DISTRICT.
	Division, Board, Department, District, if applicable	Your Position
	KETLEMAN CITY COMMUNITY, Division, Board, Department, District, if applicable	DIRECTOR (BOARD)
	➤ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)	
	Agency:	Docition
	Agolicy,	1 0011011;
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
	Scily of KETTLEMAN	Other
3.	Type of Statement (Check at least one box)	
	Annual: The period covered is January 1, 2021, through	Leaving Office: Date Left/
	December 31, 2021.	(Check one circle.)
	The period covered is/, through December 31, 2021.	The period covered is January 1, 2021, through the date of leaving officeor-
	Assuming Office: Date assumed/	☐ The period covered is/, through the date of leaving office.
	Candidate: Date of Election and office soug	ht, if different than Part 1:
4.	Schedule Summary (must complete) > Total number	er of pages including this cover page:
	Schedules attached	or pages morouning this cover page.
	_	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
	<u> </u>	
-or- None - No reportable interests on any schedule		
5.	. Verification	93239
	MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
	(Issuestate at Agency Head Section 1997)	
	DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS
	<u></u>	bibobuny Ogmail, 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.	
	certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	
	Date Signed 7/19/22	Signature (File the originally signed paper statement with your filing official.)
	monto, day, year,	үг не але онутану зунео рары магетеля кит уоот нинд онивы.)