

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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AUG 0 2 2024

NAME OF FILER (LAST) (FIRST) (NIDDLE) Barbeiro Janet Lynn KINGS COUNT 1. Office, Agency, or Court Agency Name (Do not use acronyms) Hanford Jt. Union High District Division, Board, Department, District, if applicable Trustee If filling 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 St	
Agency Name (Do not use acronyms) Hanford Jt. Union High District Division, Board, Department, District, if applicable Trustee If filling 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 Term Judge, or Court Comm (Statewide Jurisdiction) Multi-County City of Other 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through December 31, 2023. The period covered is Judge, Pro Term Judge, or Court Comm (Statewide Jurisdiction) The period covered is Judge, Pro Term Judge, or Court Comm (Statewide Jurisdiction) The period covered is Judge, Pro Term Judge, or Court Comm (Statewide Jurisdiction) Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through of leaving Office: Date Left Judge, Pro Term Judge, or Court Comm (Statewide Jurisdiction) Type of Statement (Check at least one box) Annual: The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period covered is January 1, 2023, through of leaving office. The period cove	
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Division, Board, Department, District, if applicable Trustee Candidate If filling for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: Position: Position: Judge, Retired Judge, Pro Tem Judge, or Court Comm (Statewide Juriscilction) Multi-County Gity of City of City of County of Annual: The period covered is January 1, 2023, through December 31, 2023. The period covered is, through December 31, 2023. Assuming Office: Date assumed, through the of leaving office. Candidate Your Position Agency: Position: Judge, Retired Judge, Pro Tem Judge, or Court Comm (Statewide Juriscilction) Leaving Office: Date Left	
Trustee	
Agency:	
Agency:	
State Judge, Retired Judge, Pro Tem Judge, or Court Comme (Statewide Jurisdiction) Multi-County County of Kings City of Other	
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Multi-County Mul	ilecionar
City of Other 3. Type of Statement (Check at least one box) ☐ Annual: The period covered is January 1, 2023, through December 31, 2023. -or- The period covered is/, through December 31, 2023. ☐ Assuming Office: Date assumed	iioalorio:
City ofOther	
Annual: The period covered is January 1, 2023, through December 31, 2023. -or- The period covered is	
December 31, 2023. The period covered is	
The period covered is	_
Assuming Office: Date assumed	e date
Schedule Summary (required) ► Total number of pages including this cover page: ∠ Schedules attached	., through
Schedules attached	
Schedule A-1 - Investments - schedule attached Schedule C · Income, Loans, & Business Positions - schedule	SUB-HOPEOPERIED/WORKSCHOOLS
Deliberation 14 to infractional deliberation	e 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 a	ittached
- Name of the state of the stat	
·Or- None - No reportable interests on any schedule . Verification	NOTIONAL PROPERTY OF THE PERSON OF THE PERSO
MAILING ADDRESS STREET CITY STATE ZIP CODE	
(Business or Agency Address Recommended - Public Document)	
Hanford CA 93230	
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS	
jbarbeiro@comcast.net I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the informat herein and in any attached schedules is true and complete. I acknowledge this is a public document.	ion contained
I certify under penalty of perjury under the laws of the State of California that the <u>foregoing is true and correct.</u>	
Date Signed Signature Signed Signature (month, day, year)	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM FAIR POLITICAL PRACTICES C	
Name	

(Ownership Interest is 10% or Greater)

► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Myron's Repair	Gateway Financial Planning - Ameriprise
Name Hanford, CA 93230	Name , Visalia
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS Brokerage
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 /23 /23 /23 /23 /
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship
YOUR BUSINESS POSITION Owner	YOUR BUSINESS POSITION Investor
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRORATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
\$10,001 - \$100,000 \$500 - \$1,000 \$1,001 - \$10,000	(#) \$0 - \$499
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Altach a separate sheet if necessary) MI None or Names listed below	► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if nocessary) Mill None or Names listed below
Various Clients	Various Investments
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box: INVESTMENT REAL PROPERTY	► 4, INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box: INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments: _

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
9th Avenue	E. Bass Street
CITY	CITY
Hanford, CA	Hanford, CA
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000//23//23	\$10,001 - \$100,000//23//23
数 \$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	■ Ownership/Deed of Trust Easement
Leasehold Other	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499	8 \$0 - \$499
\$10,001 - \$100,000 OVER \$100,000	\$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.	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	關 None
	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and
NAME OF LENDER*	NAME OF LENDER*
	entransia.
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% None	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
Comments:	

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
State Center Community College District	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
Fulton Street, Fresno	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Community College	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Staff	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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,)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car. boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other(Describe)	Other(Describe)
► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F	PERIOD
a retail installment or credit card transaction, made in to to members of the public without regard to your official regular course of business must be disclosed as follow	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Deal Branette
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
[] \$500 - \$1,000	
\$1,001 - \$10,000	City
	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other(Describe)
	(nescuee)
Comments:	