

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
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AUG 07 2024

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) **KINGS COUNTY ELECTIONS**
Franks Kevin Wayne

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Lemoore Union Elementary School District Area 2
Division, Board, Department, District, if applicable Your Position

▶ 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
- Multi-County _____
- City of _____
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other LUESD Area 2

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2023, through December 31, 2023.
- Leaving Office: Date Left ____/____/____ (Check one circle.)
- Multi-County _____
- County of _____
- City of _____
- Other LUESD Area 2
- Assuming Office: Date assumed ____/____/____
- The period covered is January 1, 2023, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.
- Candidate: Date of Election 11-5-24 and office sought, if different than Part 1: _____

4. Schedule Summary (required)

▶ Total number of pages including this cover page: 1

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

_____ Fallen Leaf Dr Lemoore CA 93245
MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER _____ EMAIL ADDRESS Kevinf49@yahoo.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 8-7-24 Signature _____
(month, day, year) (File the originally signed paper statement with your filing official.)