

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received
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Please type or print in ink.			
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
Mello	Chip	John	400
1. Office, Agency, or Court			RECEIVED
Agency Name (Do not use acronyms)			AUG 09 2024
Kings County Wa Division, Board, Department, District, if	ater District	Division 3	
Division, Board, Department, District, if	applicable	Your Position K	INGS COUNTY ELECTION
Divison 3		Director	
► If filing for multiple positions, list be	low or on an attachment. (Do not		
Agency:		Position:	
2. Jurisdiction of Office (Check	at least one box)		
State		 Judge, Retired Judge, Pro Tem Judge, o (Statewide Jurisdiction) 	r Court Commissioner
Multi-County		County of Kings	
City of		Other	
3. Type of Statement (Check at	•	Landy Office Dots Left	ī
Annual: The period covered is Jacobser 21, 2023.	anuary 1, zuzo, urrougn	Leaving Office: Date Left(Check one circle.	
-or- The period covered is December 31, 2023.	, throug	h The period covered is January 1, 20 of leaving office.	023, through the date
Assuming Office: Date assumed	1-7-9-74	The period covered is/ the date of leaving office.	_/, through
Candidate: Date of Election <u>/</u>	-5-24 and office sou	ght, if different than Part 1:	
4. Schedule Summary (require Schedules attached	ed) ► Total numb	per of pages including this cover page:	3
Schedule A-1 - Investments - Schedule A-2 - Investments - Schedule B - Real Property -	schedule attached	Schedule C - Income, Loans, & Business Positi Schedule D - Income - Gifts - schedule attache Schedule E - Income - Gifts - Travel Payments	ed
-or- None - No reportable in	nterests on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - P	CITY /ublic Decument)	STATE	ZIP CODE
DAYTIME TELEPHONE NUMBER		rd CA Temail address	93230
MILLING LINES INVITED INVITED	1	Ci4mello@amail.	com
I have used all reasonable diligence in herein and in any attached schedules		eviewed this statement and to the best of my knowledg	
I certify under penalty of perjury un	der the laws of the State of Call	fornia that the foregoing is true and correct.	
net siened C O 3	tı	Claustura	
Date Signed S - S - 3 (month, day,)	rear)	Signature (File the originally signed paper statement wi	th your filing official.)

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
;	Name

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Mia Mulli	11 k-11. May 1/2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DEGORIF FIGURE OF THIS BOSINESS	GENERAL BESSELL HOLY OF THIS BOSINESS
Farmer	11 retined
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
MATURE OF INITIONAL AND	NATURE OF INVESTMENT
NATURE OF INVESTMENT TRA	NATURE OF INVESTMENT Stock Other 40 K
(Describe)	(Describe)
Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IT ADDITION TO STOLE	IF APPLICABLE, LIST DATE:
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE.
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
OLINCIANE DECOMP HOW OF THIS DOORSEO	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
Control of the series of the s	
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other(Describe)
Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACCUMPED DISPOSED
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	OFFICE ALL DESCRIPTION OF THE DUCKERS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
CAID MADIET MALIE	FAIR MARKET VALUE
FAIR MARKET VALUE \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$1,000 - \$1,000,000
Land	
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
SE ADDITIONS E LIGT DATE:	IF APPLICABLE, LIST DATE:
IF APPLICABLE, LIST DATE:	IC AFFEIGABLE, CIGI DATE.
//23	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	• •
Comments:	

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
MF COOPLO	MF Cattleco
Name 6th Ave Hanford (A 93)36 Address (Business Address Acceptable)	Name 6th Ave Hanford CH. 93230 Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS Farm Sole Proprietorship	GENERAL DESCRIPTION OF THIS BUSINESS FEED 10 +
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$100,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Own ev	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA 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)
\$0 - \$499 \$10,001 - \$100,000 \$5500 - \$1,000 \$VOVER \$100,000 \$1,001 - \$10,000	\$0 - \$499
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below
A INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box: INVESTMENT VREAL PROPERTY APV VALUE OF CONTROL OF CONTRO	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box: INVESTMENT REAL PROPERTY APRIL 105 Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Feed of Description of Business Activity or City or Other Precise Location of Real Property
City or Other Precise Location of Real Property FAIR MARKET VALUE	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$40,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Properly Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other 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: _