Date Initial Filing Received

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Biglay	Michael	Joseph
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
Quail Valley Water District		
Division, Board, Department, District, if applicable	Your Position	
Board of Directors	President	
▶ If filing for multiple positions, list below or on an a	attachment. (Do not use acronyms)	
Agency:	Position:	
2. Jurisdiction of Office (Check at least one	box)	
State		Court Commissioner (Statewide Jurisdiction)
Multi-County	· · · · · · · · · · · · · · · · · · ·	Kern
City of	Utner	
3. Type of Statement (Check at least one box	)	
Annual: The period covered is January 1, 201 December 31, 2017.	7, through Leaving C (Check on	Office: Date Left/
The period covered is/	leaving	eriod covered is January 1, 2017, through the date of g office.
★ Assuming Office: Date assumed 07 / 28	2018 O The pe	eriod covered is/, through te of leaving office.
Candidate: Date of Election	and office sought, if different than Par	t 1:
4. Schedule Summary (must complete) Schedules attached  Schedule A-1 - Investments - schedule atta Schedule A-2 - Investments - schedule atta	nched Schedule C - Inco	ome, Loans, & Business Positions – schedule attached ome – Gifts – schedule attached
Schedule B - Real Property - schedule atta	ched Schedule E - Inco	ome - Gifts - Travel Payments - schedule attached
-or-		
▼ None - No reportable interests on any	r schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	STATE ZIP CODE
10047 Pretoria Road	Tehachapi	CA 93561
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS	
( 661 ) 810-5593	m.biglay@aol.	The second secon
I have used all reasonable diligence in preparing this herein and in any attached schedules is true and co		and to the best of my knowledge the information containe ument.
I certify under penalty of perjury under the laws	of the State of California that the foregoing	ing is true and correct.
Date Signed 9-29-18	Signature/	Mahl Degl
(month, day, year)		(File the originally signed statement with your filing official.)

Date Initial Filing Received Official Use Only

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
HARDENBROOK	RANDY		DEE
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
QUAIL VALLEY WATER DISTR	RICT		
Division, Board, Department, District, if ap	plicable	Your Position	
		GENERAL MANAGER	
► If filing for multiple positions, list below	or on an attachment. (Do not use acro.	nyms)	
Agency:		Position:	
2. Jurisdiction of Office (Check at	least one box)		
☐ State		Judge or Court Commissioner (Sta	atewide Jurisdiction)
Multi-County		County of PORTION OF KE	RN
City of		Other	
City of		Other	
3. Type of Statement (Check at lea	st one box)		
Annual: The period covered is January December 31, 2017.	uary 1, 2017, through	Leaving Office: Date Left (Check one)	<u></u>
The period covered is December 31, 2017.	/, through	<ul> <li>The period covered is January leaving office.</li> </ul>	y 1, 2017, through the date of
Assuming Office: Date assumed _		The period covered is the date of leaving office.	/, through
Candidate: Date of Election	and office sought, if diff	erent than Part 1:	
4. Schedule Summary (must co	omplete) ► Total number of p	ages including this cover pa	ge:4
Schedules attached			
Schedule A-1 - Investments – so	chedule attached X Sch	edule C - Income, Loans, & Business	s Positions - schedule attached
Schedule A-2 - Investments – so		edule D - Income - Gifts - schedule	
Schedule B - Real Property – so		edule E - Income – Gifts – Travel Pa	yments - schedule attached
-or-			
☐ None - No reportable interes	ts on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pub	CITY	STATE	ZIP CODE
24750 SAND CANYON ROAD		PI CA	93561
DAYTIME TELEPHONE NUMBER	E-MA	IL ADDRESS	
( 661 ) 822-1923		NDY@QVWD.ORG	
I have used all reasonable diligence in pherein and in any attached schedules is	reparing this statement. I have reviewed turne and complete. I acknowledge this i	his statement and to the best of my kn s a public document.	nowledge the information contained
I certify under penalty of perjury under	er the laws of the State of California th	at the foregoing is true and correct	7
Date Signed 3/1/18	Signat	ure /	
(month, day, yea		(File the originally signed staten	nent with your filing official.)

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

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION RANDY D. HARDENBROOK

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
RANDY HARDENBROOK	
Name	Name
24630 NYAMAZI CT, TEHACHAPI CA	
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	Itust, 90 to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
REPAIR AND MAINTENANCE SERVICES	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999	\$0 - \$1,999
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
	NATURE OF INVESTMENT
NATURE OF INVESTMENT  Partnership X Sole Proprietorship	Partnership Sole Proprietorship Other
Otner	Ciner Other
YOUR BUSINESS POSITION OWNER	YOUR BUSINESS POSITION
	THE VALLE PRO DATE
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
<u>\$0 - \$499</u> \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000	\$500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
None or Names listed below	☐ None or ☐ Names listed below
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST	LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
	News of Duringer Entity if Investment or
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 or	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
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	\$2,000 - \$10,000 \$10,001 - \$100,000
\$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
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Yrs, remaining	Yrs. remaining
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
	FDDC Fa 700 (2017 (2010) Cal. A
Comments:	FPPC Form 700 (2017/2018) Sch. A- FPPC Advice Email: advice@fppc.ca.gc

	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
ľ	Name
١	RANDY D HARDENBROOK

SSESSOR'S PARCEL NUMBER OR STREET ADDRESS	459-171-02-00-7
224-010-50-00-0	
DITY	CITY
TEHACHAPI	TEHACHAPI
AIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 2 \$40,001 \$400,000	<b>□</b> \$2,000 - \$10,000
\$10,001 - \$1,000,000 ACQUIRED DISPOSED	\$10,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust
Leasehold Other	Leasehold Other
F RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater	SOURCES OF RENTAL INCOME: If you own a 10% or greater
interest, list the name of each tenant that is a single source of	interest, list the name of each tenant that is a single source of income of \$10,000 or more.
income of \$10,000 or more.	None
Mone	
You are not required to report loans from commercia business on terms available to members of the publi	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and
You are not required to report loans from commercia	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu	Il lending institutions made in the lender's regular course of courted without regard to your official status. Personal loans and siness must be disclosed as follows:
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu	Il lending institutions made in the lender's regular course of court without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)  Mone  HIGHEST BALANCE DURING REPORTING PERIOD	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  None
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of business (Business Address Acceptable)  BUSINESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  Whighest BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
You are not required to report loans from commercia business on terms available to members of the publi loans received not in a lender's regular course of bu NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	Il lending institutions made in the lender's regular course of c without regard to your official status. Personal loans and siness must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
RANDY D. HARDENBROOK	

AIL VALLEY WATER DISTRICT  RESS (Business Address Acceptable)  750 SAND CANYON ROAD, TEHACHAPI, CA  NESS ACTIVITY, IF ANY, OF SOURCE  R BUSINESS POSITION  NERAL MANAGER  SS INCOME RECEIVED No Income - Business Position Only  500 - \$1,000 \$1,001 - \$10,000  GIO.001 - \$100,000 OVER \$100,000  SIDERATION FOR WHICH INCOME WAS RECEIVED  alary Spouse's or registered domestic partner's income  (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
RESS (Business Address Acceptable)  750 SAND CANYON ROAD, TEHACHAPI, CA  NESS ACTIVITY, IF ANY, OF SOURCE  R BUSINESS POSITION  NERAL MANAGER  SS INCOME RECEIVED No Income - Business Position Only  500 - \$1,000 \$1,001 - \$10,000  10,001 - \$100,000 OVER \$100,000  SIDERATION FOR WHICH INCOME WAS RECEIVED  alary Spouse's or registered domestic partner's income  (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
750 SAND CANYON ROAD, TEHACHAPI, CA  NESS ACTIVITY, IF ANY, OF SOURCE  R BUSINESS POSITION  NERAL MANAGER  SS INCOME RECEIVED No Income - Business Position Only 500 - \$1,000 \$1,001 - \$10,000  IO,001 - \$100,000 OVER \$100,000  SIDERATION FOR WHICH INCOME WAS RECEIVED alary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
NESS ACTIVITY, IF ANY, OF SOURCE  R BUSINESS POSITION  NERAL MANAGER  SS INCOME RECEIVED No Income - Business Position Only  500 - \$1,000 \$1,001 - \$10,000  10,001 - \$100,000 OVER \$100,000  SIDERATION FOR WHICH INCOME WAS RECEIVED  alary Spouse's or registered domestic partner's income  (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
R BUSINESS POSITION  NERAL MANAGER  SS INCOME RECEIVED  No Income - Business Position Only 500 - \$1,000  \$1,001 - \$10,000  10,001 - \$100,000  OVER \$100,000  SIDERATION FOR WHICH INCOME WAS RECEIVED alary  Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
NERAL MANAGER  SS INCOME RECEIVED No Income - Business Position Only  500 - \$1,000 \$1,001 - \$10,000  10,001 - \$100,000 OVER \$100,000  SIDERATION FOR WHICH INCOME WAS RECEIVED  alary Spouse's or registered domestic partner's income  (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
NERAL MANAGER  SS INCOME RECEIVED No Income - Business Position Only  500 - \$1,000 \$1,001 - \$10,000  10,001 - \$100,000 OVER \$100,000  SIDERATION FOR WHICH INCOME WAS RECEIVED  alary Spouse's or registered domestic partner's income  (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
SS INCOME RECEIVED No Income - Business Position Only 500 - \$1,000 \$1,001 - \$10,000  10,001 - \$100,000 OVER \$100,000  SIDERATION FOR WHICH INCOME WAS RECEIVED alary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
\$1,000   \$1,001 - \$10,000   \$1,001 - \$10,000   \$1,001 - \$10,000   OVER \$100,000   OVER \$100,
OVER \$100,000  OVER \$100,000  SIDERATION FOR WHICH INCOME WAS RECEIVED  alary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
SIDERATION FOR WHICH INCOME WAS RECEIVED  alary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
alary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of (Real property, car, boat, etc.)
(For self-employed use Schedule A-2.)  artnership (Less than 10% ownership. For 10% or greater use chedule A-2.)  ale of
ale of
(Real property, car, boat, etc.)
pan repayment
ommission or Rental Income, list each source of \$10,000 or more
(Describe)
(Describe)
ther(Describe)
BENEFIT OF STREET
stitutions, or any indebtedness created as part of a regular course of business on terms available to rsonal loans and loans received not in a lender's
REST RATE TERM (Months/Years)
%
JRITY FOR LOAN
one Personal residence
eal Property
Street address
City
suarantor
suarantor
other(Describe)

# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received Official Use Only

NAME OF FILER (LAST) (FIRST)	(MIDDLE)
DAGGETT MATTHEO	N PHILIP
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
QUAIL VALLEY WATER DIS	TRICT
Division, Board, Department, District, if applicable	Your Position
BOARD OF DIRECTORS	BOARD MEMBER
▶ If filing for multiple positions, list below or on an attachment. (Do no	t use acronyms)
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	000000000000000000000000000000000000000
☐ City of	
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2017, through December 31, 2017.	Leaving Office: Date Left/(Check one)
The period covered is/, through December 31, 2017.	The period covered is January 1, 2017, through the date of leaving office.
Assuming Office: Date assumed	The period covered is, through the date of leaving office.
Candidate: Date of Election and office so	ught, if different than Part 1:
4. Schedule Summary (must complete) ► Total num Schedules attached	ber of pages including this cover page:
Schedules attached	
Schedule A-1 - Investments – schedule attached  Schedule A-2 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – 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 (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
24750 SAND CANYON RD	TEHACHAPE CA 93561
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS
(661) 822-1923	MATT @ QVWD. ORG
I have used all reasonable diligence in preparing this statement. I have herein and in any attached schedules is true and complete. I acknowle	reviewed this statement and to the best of my knowledge the information contained edge this is a public document.
I certify under penalty of perjury under the laws of the State of Ca	lifornia that the foregoing is true and correct.
Date Signed 02/24/2018	Signature Will The
(month, day, year)	(File the originally signed statement with your filing official.)

Date Initial Filing Received

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
LEONARD	RITA	L
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
GUAIL VALLEY WAT	ER DISTRIC	
Division, Board, Department, District, if applicable	Your Pos	sition
BOARD		
▶ If filing for multiple positions, list below or on an attachme	ent. (Do not use acronyms)	
Agency:	Position	Director
2. Jurisdiction of Office (Check at least one box)		
☐ State	☐ Judge	or Court Commissioner (Statewide Jurisdiction)
Multi-County		of KERN (Portion of)
City of		
	Culoi _	
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2017, throug December 31, 2017.	jh Leavii (Checi	ng Office: Date Left/
-or- The period covered is//	•	e period covered is January 1, 2017, through the date of
December 31, 2017.		wing office.
Assuming Office: Date assumed		e period covered is, through e date of leaving office.
Candidate: Date of Election and	d office sought, if different than	Part 1:
	otal number of pages inc	cluding 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		Income – Giffs – schedule attached
Schedule B - Real Property – schedule attached	Schedule E -	Income - Gifts - Travel Payments - schedule attached
None - No reportable interests on any sched     ■ None - No reportable interests on any scheden.	ule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	STATE ZIP CODE
24750 SAND CAN	YON ROAD E-MAIL ADDRESS	TEHACHAPI, CA. 93561
(lele1) 822-1923		
I have used all reasonable diligence in preparing this stateme herein and in any attached schedules is true and complete.		
I certify under penalty of perjury under the laws of the S	State of California that the fore	going is true and correct.
Date Signed February 8, 2018	Signature	ta Leonard (File the originally signed statement with your filing official)
·····,,,-,		C



Date Initial Filing Received
Official Use Only

NAME OF FILER (LAST) LOPEZ (FIRST)	NRIQUE (MIDDLE) S
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)  QUA)LVALLEY  Division, Board, Department, District, if applicable  ROARD	TEV DISTRICT 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	☐ Judge or Court Commissioner (Statewide Jurisdiction) ☐ County of
City of	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2017, through December 31, 2017.	Leaving Office: Date Left/(Check one)
The period covered is/, through December 31, 2017.	<ul> <li>The period covered is January 1, 2017, through the date of leaving office.</li> <li>-or-</li> </ul>
Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.
Candidate: Date of Election and office sought, if	f different than Part 1:
4. Schedule Summary (must complete) ► Total number of Schedules attached	of pages including this cover page:
Schedule A-2 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached  Schedule D - Income – Gifts – 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)  2376 w 166 th St Tok  DAYTIME TELEPHONE NUMBER	PRANC CA 90505
B10) 2255659	macsashazeAttonet
I have used all reasonable diligence in preparing this statement. I have reviewe herein and in any attached schedules is true and complete. I acknowledge the	ed this statement and to the best of my knowledge the information contained is 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 2-20~ 7018 Sig	nature
(month, day, year)	(File the originally signed statement with your filing official.)



Date Initial Filing Received Official Use Only

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
CANTRELL	RICHARD		J
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
QUAIL VALLEY WATER DISTRICT			
Division, Board, Department, District, if applicable	е ү	our Position	
	E	Board Secretary/Treasurer	
▶ If filing for multiple positions, list below or on	an attachment. (Do not use acrony)	ns)	
Agency:		Position:	
2. Jurisdiction of Office (Check at least	one box)		
☐ State		Judge or Court Commissioner (St	otovido ludedistiss)
Multi-County		County of PORTION OF KE	RN
City of			
		Other	
3. Type of Statement (Check at least one	box)		
Annual: The period covered is January 1, 3 December 31, 2017.	2017, through	Leaving Office: Date Left(Check one)	
The period covered is/ December 31, 2017.		The period covered is Januar leaving officeor-	y 1, 2017, through the date of
Assuming Office: Date assumed/_		The period covered is the date of leaving office.	/, through
Candidate: Date of Election	and office sought, if differer	nt than Part 1:	
4. Schedule Summary (must complete Schedules attached	e) ► Total number of page	es including this cover pa	ge:1
Schedule A-1 - Investments - schedule	attached Schedu	le C - Income, Loans, & Business	Positions – schedule attached
Schedule A-2 - Investments - schedule	attached	le D - Income - Gifts - schedule	
Schedule B - Real Property – schedule a	attached Schedu	le E - Income – Gifts – Travel Pay	yments - schedule attached
Or-  None - No reportable interests on a	nv schedule		
5. Verification			
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Public Docume 24750 Sand Canyon Road	Tehachapi		
DAYTIME TELEPHONE NUMBER	E-MAIL AD	Calif	93561
( 661 ) 822-1923	Richard	d@qvwd.org	
I have used all reasonable diligence in preparing therein and in any attached schedules is true and	his statement. I have reviewed this s complete. I acknowledge this is a p	tatement and to the best of my kno ublic document.	wledge the information contained
I certify under penalty of perjury under the law			1 1 1
Date Signed January 31st 2018	Signature _	PM F	
(month, day, year)	Olyndture _	(File the originally signed stateme	nt with your filing official.)

Date Initial Filing Received

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Sims	Richard	D
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
Quail Valley Water District		
Division, Board, Department, District, if app	licable	Your Position
		Director
▶ If filing for multiple positions, list below	or on an attachment. (Do not use	e acronyms)
Agency:		Position:
2. Jurisdiction of Office (Check at I	east one hoy!	
State	cust one boxy	
		Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County		County of Portion of Kern
City of		Other
3. Type of Statement (Check at least	one box)	
Annual: The period covered is Janua December 31, 2017.		Leaving Office: Date Left/(Check one)
The period covered is December 31, 2017.	, through	O The period covered is January 1, 2017, through the date of leaving office.
Assuming Office: Date assumed		The period covered is/, through the date of leaving office.
Candidate: Date of Election	and office sought,	if different than Part 1:
4. Schedule Summary (must con Schedules attached	nplete) > Total number	of pages including this cover page:
Schedule A-1 - Investments - sche	dule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments - sche	Total Control of the	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property - sche	dule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or-		
✓ None - No reportable interests	on any schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public L 24750 Sand Canyon RD, Tehach		STATE ZIP CODE
DAYTIME TELEPHONE NUMBER	1	E-MAIL ADDRESS
( 661 ) 822-1923		dsims@qvwd.org
I have used all reasonable diligence in prepa herein and in any attached schedules is tru	aring this statement. I have review	ved this statement and to the best of my knowledge the information contained
I certify under penalty of perjury under t		
Date Signed 01/25/2018		gnature Rucharf & Some
(month, day, year)		(File the originally signed statement with your filing official.)

# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Sims	Richard	D
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
Quail Valley Water District		
Division, Board, Department, District, if app	licable	Your Position
		Director
▶ If filing for multiple positions, list below	or on an attachment. (Do not u	use acronyms)
Agency:		Position:
2. Jurisdiction of Office (Check at I	east one box)	
State		☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County		· · · · · · · · · · · · · · · · · · ·
City of		
G Gay of		Other
3. Type of Statement (Check at least	tone box)	
Annual: The period covered is Janual December 31, 2017.	ry 1, 2017, through	Leaving Office: Date Left/(Check one)
The period covered is December 31, 2017.	, through	The period covered is January 1, 2017, through the date of leaving office.
Assuming Office: Date assumed		The period covered is/, through the date of leaving office.
Candidate: Date of Election	and office sough	it, if different than Part 1:
4. Schedule Summary (must con Schedules attached	nplete) ► Total numbe	r of pages including this cover page:
Schedule A-1 - Investments - sche	edule attached	Schedule C - Income, Loans, & Business Positions schedule attached
Schedule A-2 - Investments - sche	dule attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property sche	dule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or-		
☑ None - No reportable interests	on any schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public L	CITY Occument)	STATE ZIP CODE
24750 Sand Canyon RD, Tehach		
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS
( 661 )822-1923		dsims@qvwd.org
nerein and in any attached schedules is tru	e and complete. I acknowledge	
I certify under penalty of perjury under t	he laws of the State of California	mia that the foregoing is true and correct,
Date Signed 01/25/2018		Signature Rechard Demo
(month, day, year)		(File the originally signed statement with your filing official.)

GENE R. MCMURTREY \*
ROBERT W. HARTSOCK
JAMES A. WORTH
ISAAC L. ST. LAWRENCE
DANIEL N. RAYTIS

\* DENOTES OF COUNSEL

LAW OFFICES

#### McMURTREY, HARTSOCK & WORTH

A PROFESSIONAL CORPORATION

AREA CODE 661 TELEPHONE 322-4417 FAX 322-8123

2001 22ND STREET, SUITE 100 BAKERSFIELD, CALIFORNIA 93301

March 14, 2018

Randy Hardenbrook QUAIL VALLEY WATER DISTRICT 24750 Sand Canyon Road Tehachapi, CA 93561

Re: Statement of Economic Interests - Form 700

Dear Mr. Hardenbrook:

Enclosed please find Statement of Economic Interests - Form 700 for the calendar year 2017/2018 for the following individuals:

Gene R. McMurtrey Robert W. Hartsock James A. Worth Isaac L. St. Lawrence Daniel N. Raytis

Please retain the same with your permanent files.

Sincerely,

Guadalupe Gonzalez

Secretary to Robert W. Hartsock

:gg Enclosures

# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

Please type or print in ink.

#### STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

**COVER PAGE** 

Filed Date: 03/06/2018 02:52 PM SAN: FPPC

NAME OF FILER (LAST) (FIRST) (MIDDLE) McMurtrey Gene R 1. Office, Agency, or Court Agency Name (Do not use acronyms) Consolidated Central Valley Table Grape Pest & Disease C. D. Division, Board, Department, District, if applicable Your Position General Counsel ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: \_\_\_ 2. Jurisdiction of Office (Check at least one box) ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction) Multi-County Kern, Tulare County of \_\_\_\_\_ \_\_\_ City of \_\_\_\_\_\_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2017, through Leaving Office: Date Left \_\_\_\_/\_\_\_ December 31, 2017. (Check one) -or-O The period covered is January 1, 2017, through the date of The period covered is \_\_\_\_\_\_, through December 31, 2017. O The period covered is \_\_\_\_\_\_\_, through Assuming Office: Date assumed \_\_\_\_\_/\_\_\_\_ the date of leaving office. Candidate: Date of Election \_\_\_\_\_\_ 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) Bakersfield CA 2001 22nd St Ste 100 93301-3831 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (661) 322-4417 gene@mcmurtreyhartsock.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. 03/06/2018 02:52 PM Electronic Submission Date Signed . Signature \_\_ (month, day, year) (File the originally signed statement with your filing official.)

#### 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
Gene McMurtrey

► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
McMurtrey, Hartsock & Worth	Mark Properties
Name	Name
2001 22nd Street, Bakersfield, CA 93301	2001 22nd Street, Bakersfield, CA 93301
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one ☐ Trust, go to 2	Check one
and a sumple to the box, then go to z	☐ Trust, go to 2  ■ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Law Firm	Real Estate
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$\infty\$ \$0 - \$1,999	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000  /17  /_17   \$10,001 - \$100,000   ACQUIRED   DISPOSED   \$1,000,000   Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Corporation Other	NATURE OF INVESTMENT  Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Employee	YOUR BUSINESS POSITION Partner
► 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 TO THE ENTITY/TRUST)
\$0 - \$499	□ \$0 - \$499 <b>×</b> \$10,001 - \$100,000
☐ \$500 - \$1,000	S500 - \$1,000 OVER \$100,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	\$1,001 - \$10,000
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
None or ▼ Names listed below	None or Names listed below
SEE ATTACHED	McMurtrey, Hartsock & Worth
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT
	Office Building
Name of Business Entity, if Investment, or	Name of Business Entity if Investment
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
	2001 22nd Street, Bakersfield, CA 93301
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$\int \\$2,000 - \\$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property	Check box if additional schedules reporting investments or real property
are attached	are attached

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

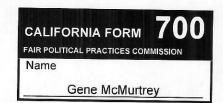
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Gene McMurtrey

► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
4M Investments	
Name	Name
275 Panorama Drive, Bakersfield, CA 93305	
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
☐ Trust, 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
Real Estate Rental	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	
\$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 <u>01 / 01 / 17</u> <u></u>	\$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED	S10,001 - \$100,000 ACQUIRED DISPOSED
Over \$1,000,000	\$1,000,001 - \$1,000,000 Over \$1,000,000
	= 0.61, \$1,000,000
NATURE OF INVESTMENT  ★ Partnership Sole Proprietorship	NATURE OF INVESTMENT
Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Partner	VOUS SUBMESS SOCIETY
	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 TO THE ENTITY/TRUST)
S0 - \$499 X \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
S500 - \$1,000 OVER \$100,000	\$500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000	\$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
None or Names listed below	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below
Car Quest Auto Parts	None of Linearity Below
Treasure Trove	
AAMCO	
PuroClean	
A INVESTMENTS AND INTERESTS IN DEAL PROPERTY OF	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT <b>X</b> REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
SEE ATTACHED	
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, or
Rental Real Property	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Provide A P. C. A. C. C.
City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> 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	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
VOVer \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED  Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
▼ Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property	Check box if additional schedules reporting investments or real property
are attached	are attached

#### **SCHEDULE A-2**

Attachment



BUSINESS ENTITY OR TRUST : McMurtrey, Hartsock & Worth

LIST OF REPORTABLE SINGLE SOURCES OF INCOME OF \$10,000 OR MORE	
Buena Vista Water Storage District	
Kern Delta Water District	
Rosedale Rio Bravo Water Storage District	
Kern Fan Authority	
Oildale Mutual Water Company	
Keith Gardiner	
Pacific Ag Management	
SunSelect Produce	

#### **BUSINESS ENTITY OR TRUST: 4M Investments**

Names of Business Entities, if Investments, or Assessor's Parcel Numbers or Street Addresses of Real Properties	EL HARRIS
040-190-07 = fmv between \$100,000 - \$1,000,000	di nemi
031-350-26 = fmv between \$100,000 - \$1,000,000	
191-151-03 = fmv between \$100,000 - \$1,000,000	
112-284-13 = fmv between \$100,000 - \$1,000,000	
128-085-046 = fmv between \$100,000 - \$1,000,000	
134-050-12 & 13 = fmv between \$100,000 - \$1,000,000	
134-050-10 & 11 = fmv between \$100,000 - \$1,000,000	
405-230-02 = fmv over \$1,000,000	
291-294-033 = fmv between \$100,000 - \$1,000,000	

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	
Gene McMurtrey	

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
Gibson & Commercial	6000 C Auburn Street
CITY	CITY
Bakersfield, CA 93301	
Dakersheid, GA 95501	Bakersfield, CA 93305
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000     \$10,001 - \$1,000,000     ACQUIRED   DISPOSED   Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   / 17   / 17   / 17     \$100,001 - \$1,000,000   ACQUIRED   DISPOSED   Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	▼ Ownership/Deed of Trust
Leasehold Other	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
□ \$0 - \$499 □ \$500 - \$1,000 <b>⋉</b> \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 <b>X</b> \$1,001 - \$10,000
S10,001 - \$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.  None	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.
business on terms available to members of the public	lending institutions made in the lender's regular course of
You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of busi	lending institutions made in the lender's regular course of
business on terms available to members of the public loans received not in a lender's regular course of business.	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of businame of LENDER*	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of businame of LENDER*  ADDRESS (Business Address Acceptable)	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of businame of Lender*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
business on terms available to members of the public loans received not in a lender's regular course of businame of Lender*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  NTEREST RATE  TERM (Months/Years)  None	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)
business on terms available to members of the public loans received not in a lender's regular course of businame of Lender*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  NTEREST RATE  TERM (Months/Years)  Mone	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of businame of Lender*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  NTEREST RATE  TERM (Months/Years)  Mone  HIGHEST BALANCE DURING REPORTING PERIOD	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  Which is a second of the lender's regular course of the lender's regular cou

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	
Gene McMurtrey	

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
6008 B Auburn Street	6008 C Auburn Street
CITY	
Bakersfield, CA 93305	CITY
Bakersheid, CA 93305	Bakersfield, CA 93305
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	
\$0 - \$499 \$500 - \$1,000 <b>X</b> \$1,001 - \$10,000	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$10,001 - \$100,000 OVER \$100,000	\$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	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
* You are not required to report loans from commercial le business on terms available to members of the public w loans received not in a lender's regular course of busine	nding institutions made in the lender's regular course of ithout regard to your official status. Personal loans and ess must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
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)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \qquad \qqquad \qqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqq	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
comments:	

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	700  OMMISSION
Name	
Gene McMurtrey	

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1019 Panorama Drive	4700 SandyLand, #22
CITY	CITY
Bakersfield, CA 93305	Carpenteria, CA
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   01 / 01 / 17	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000     \$10,001 - \$100,000       17
NATURE OF INTEREST	NATURE OF INTEREST
▼ Ownership/Deed of Trust	Ownership/Deed of Trust     Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 <b>K</b> \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$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	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.     X   None
You are not required to report loans from commercial le business on terms available to members of the public w loans received not in a lender's regular course of business.	ending institutions made in the lender's regular course of without regard to your official status. Personal loans and ess must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
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)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	☐ Guarantor, if applicable
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Gene McMurtrey

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
38942 Lake Point Court	12646 Cattle King Drive
CITY	CITY
Bass Lake, CA	Bakersfield, CA 93306
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOS  Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
▼ Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Care relief CA V3500	
Leasehold	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or grea interest, list the name of each tenant that is a single sou income of \$10,000 or more.	
<b>⋉</b> None	None
▼ None  You are not required to report loans from comm	nercial lending institutions made in the lender's regular course or public without regard to your official status. Personal loans and
You are not required to report loans from community business on terms available to members of the	nercial lending institutions made in the lender's regular course of public without regard to your official status. Personal loans and
You are not required to report loans from communities on terms available to members of the loans received not in a lender's regular course	nercial lending institutions made in the lender's regular course of public without regard to your official status. Personal loans and of business must be disclosed as follows:
You are not required to report loans from community business on terms available to members of the loans received not in a lender's regular course	nercial lending institutions made in the lender's regular course of public without regard to your official status. Personal loans and of business must be disclosed as follows:
You are not required to report loans from comm business on terms available to members of the loans received not in a lender's regular course NAME OF LENDER*	nercial lending institutions made in the lender's regular course of public without regard to your official status. Personal loans and of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
You are not required to report loans from comm business on terms available to members of the loans received not in a lender's regular course NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	nercial lending institutions made in the lender's regular course of public without regard to your official status. Personal loans and of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
You are not required to report loans from comm business on terms available to members of the loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)	nercial lending institutions made in the lender's regular course of public without regard to your official status. Personal loans and 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)
You are not required to report loans from communications on terms available to members of the loans received not in a lender's regular course NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	nercial lending institutions made in the lender's regular course of public without regard to your official status. Personal loans and 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
You are not required to report loans from comm business on terms available to members of the loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	nercial lending institutions made in the lender's regular course of public without regard to your official status. Personal loans and of business must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
You are not required to report loans from comm business on terms available to members of the loans received not in a lender's regular course  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	nercial lending institutions made in the lender's regular course of public without regard to your official status. Personal loans and of business must be disclosed as follows:    NAME OF LENDER*

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM	
FAIR POLITICAL PRACTICES CO	OMMISSION
Gene McMurtrey	

► 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
McMurtrey, Hartsock & Worth	Mark Properties
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2001 22nd Street, Bakersfield, CA 93301	2001 22nd Street, Bakersfield, CA 93301
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legal Services	Real Estate
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Employee	Partner
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 \$1,000
☐ \$10,001 - \$100,000 <b>※</b> OVER \$100,000	▼ \$10,001 - \$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.)
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
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)	McMurtrey, Hartsock & Worth - Tenant
Other	(Describe)
(Describe)	Other(Describe)
retail installment or credit card transaction, made in the	nding institutions, or any indebtedness created as part of a lender's regular course of business on terms available to tus. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	Other(Describe)
Comments:	

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM	
Name	
Gene McMurtrey	

1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
4M Investments	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
275 Panorama Drive, Bakersfield, CA 93305	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Partner	
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
▼ \$10,001 - \$100,000	\$10,001 - \$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
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Car Quest Auto Parts - Tenant	
(Describe)	(Describe)
Other(Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIO	
You are not required to report loans from commercial lend retail installment or credit card transaction, made in the le members of the public without regard to your official statu regular course of business must be disclosed as follows:	ender's regular course of business on terms available to
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
	□ Red Preset
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
	Other
	(Describe)
Comments:	

Date Initial Filing Received
Official Use Only

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
HARTSOCK	ROBERT		W.
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
SEE ATTACHMENT			
Division, Board, Department, District, if applicable	Your Positi	on	
▶ If filing for multiple positions, list below or on an at	tachment. (Do not use acronyms)		
Agency:	Position: _		
2. Jurisdiction of Office (Check at least one b	pox)		
☐ State		Court Commissioner (Sta	tewide Jurisdiction)
Multi-County			termas surroundanty
City of			
3. Type of Statement (Check at least one box)			
Annual: The period covered is January 1, 2017, December 31, 2017.	through Leaving (Check of	Office: Date Left	<i></i>
The period covered is//		period covered is January ng office.	1, 2017, through the date of
Assuming Office: Date assumed/	/ O The	period covered is/. late of leaving office.	, through
Candidate: Date of Election	and office sought, if different than Pa	art 1:	
4. Schedule Summary (must complete) Schedules attached	► Total number of pages inclu	ıding this cover pag	re: <sup>7</sup>
<ul> <li>✓ Schedule A-1 - Investments – schedule attach</li> <li>✓ Schedule A-2 - Investments – schedule attach</li> </ul>		come, Loans, & Business come – Gifts – schedule a	Positions – schedule attached
Schedule B - Real Property – schedule attach			ments – schedule attached
-or-	Gonoadio E ///k	oome ams maver ay	ments – scriedule attached
☐ None - No reportable interests on any s	schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	STATE	ZIP CODE
2001 22nd Street, Suite 100	Bakersfield	CA	93301
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS		
( 661 ) 322-4417		urtreyhartsock.com	
I have used all reasonable diligence in preparing this since herein and in any attached schedules is true and com	tatement. I have reviewed this statement plete. I acknowledge this is a public doc	and to the best of my kno cument.	wledge the information contained
I certify under penalty of perjury under the laws of	f the State of California that the forego	oing is true and correct.	
Date Signed March 14, 2018	Signature	Then fler	L
(month, day, year)		(File the originally signed stateme	nt with your filing official.)

#### **FORM 700 - COVER PAGE ATTACHMENT**

#### ROBERT W. HARTSOCK

1.	Office, Agency, or Court/Position	2.	<u>Jurisdiction of Office</u>
	Boron Community Services District, District Counsel		County of Kern
	Buena Vista Water Storage District, District Counsel		County of Kern
	Cawelo Water District, District Counsel		County of Kern
	East Niles Community Services District, District Counsel		County of Kern
	Golden Empire Transit District, District Counsel		County of Kern
	Henry Miller Water District, District Counsel		County of Kern
	Indian Wells Valley Groundwater Authority, District Counse	el	Counties of Kern, Inyo and San Bernardino
	Indian Wells Valley Water District, District Counsel		Counties of Kern and San Bernardino
	Kern Delta Water District, District Counsel		County of Kern
	Kern Fan Authority, District Counsel		County of Kern
	Mojave Public Utility District, District Counsel		County of Kern
	Olcese Water District, District Counsel		County of Kern
	Quail Valley Water District, District Counsel		County of Kern
	Rosedale-Rio Bravo Water Storage District, District Counsel	L	County of Kern
	Consolidated Central Valley Table Grape Pest & Disease Control District, District Counsel		Counties of Kern and Tulare

### SCHEDULE A-1 Investments

#### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700	
FAIR POLITICAL PRACTICES COMMISSION	

Name

ROBERT W. HARTSOCK

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
IBM	DOW CHEMICAL
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Computers/Electronics	Chemical Company
FAIR MARKET VALUE	FAIR MARKET VALUE
<b>×</b> \$2,000 - \$10,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$10,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  Stock Other	NATURE OF INVESTMENT
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
DISNEY	INTEL
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Amusement	Computer Parts
FAIR MARKET VALUE	FAIR MARKET VALUE
<b>×</b> \$2,000 - \$10,000	\$2,000 - \$10,000   X \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	
X   Stock   Other	NATURE OF INVESTMENT
(Describe)	X Stock Other(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O 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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF DUDINESS ENTERV
HARLEY DAVIDSON	NAME OF BUSINESS ENTITY
	PEPSICO
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Motorcycle Mfr.	Food Company
FAIR MARKET VALUE	FAIR MARKET VALUE
<u>■</u> \$2,000 - \$10,000 <u>×</u> \$10,001 - \$100,000	\$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	NATURE OF INVESTMENT  Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O 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:
ACQUIRED DISPOSED	ACQUIRED DISPOSED

#### SCHEDULE A-1 **Investments**

#### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

ROBERT W. HARTSOCK

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
MICROSOFT	YUM
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Computer Programs	Foods
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000	X \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  Stock Other	NATURE OF INVESTMENT   ズ  Stock
(Describe)	(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
QUALCOMM	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Internet	
FAIR MARKET VALUE	FAIR MARKET VALUE
<b>×</b> \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other
Partnership (Income Received of \$0 - \$499	(Describe)
○ Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//_17	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY  AMAZON	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Internet Business	
FAIR MARKET VALUE	FAIR MARKET VALUE
<b>×</b> \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// 17/ 17	, , 17
ACQUIRED DISPOSED	//
SIG. SOLD	ACQUIRED DISPOSED

### 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

ROBERT W. HARTSOCK

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
McMURTREY, HARTSOCK & WORTH	MARK PROPERTIES
Name	Name
2001 22nd Street, Suite 100, Bakersfield, CA 93301	2001 22nd Street, Bakersfield, CA 93301
Address (Business Address Acceptable)	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	GENERAL DESCRIPTION OF THIS BUSINESS
Law Office	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000   J_J_17   J_7   J_7   J_7   J_7   J_7   J_7   \$10,001 - \$100,000   ACQUIRED   DISPOSED   DISPOSE	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:     \$0 - \$1,999     \$2,000 - \$10,000     J_17   J_17     J_17     J_17   J_17     J_17   J_17   J_18   J_18
President	X Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	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	□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 ☑ \$1,001 - \$10,000
None or Names listed below  SEE ATTACHMENT	None or Names listed below
➤ 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  2001 22nd Street
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, or Assessor's Parcel Number or Street Address of Real Property  Bakersfield, CA 93301
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:   \$2,000 - \$10,000   \$10,001 - \$100,000  / 17  /	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST
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

#### FORM 700 - SCHEDULE A-2 ATTACHMENT

#### ROBERT W. HARTSOCK

#### 1. Business Entity or Trust:

McMurtrey, Hartsock & Worth

#### 3. <u>List Each Reportable Source of Income/Loans of \$10,000 or More:</u>

Buena Vista Water Storage District
Cawelo Water District
East Niles Community Services District
Golden Empire Transit District
Henry Miller Water District
Indian Wells Valley Groundwater Authority
Indian Wells Valley Water District
Kern Delta Water District
Kern Fan Authority
Mojave Public Utility District
Oildale Mutual Water Company
Olcese Water District
Rosedale-Rio Bravo Water Storage District

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

Comment of the Commen	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
The state of the s	Name
	ROBERT W. HARTSOCK

NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME	
McMURTREY, HARTSOCK & WORTH	MARK PROPERTIES	
ADDRESS (Business Address Acceptable)		
2001 22nd Street, Suite 100, Bakersfield, CA 93301	ADDRESS (Business Address Acceptable) 2001 22nd Street, Bakersfield, CA 93301	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
Law Office	Real Estate	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION	
Attorney / President of Corporation	Partner	
GROSS INCOME RECEIVED No Income - Business Position Only  \$500 - \$1,000 \$1,001 - \$10,000  \$10,001 - \$100,000 X 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)	GROSS INCOME RECEIVED No Income - Business Position Onl \$500 - \$1,000 \$10,001 - \$10,000  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)	
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)	
ADDRESS (Business Address Acceptable)	% None	
	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence	
	Real Property	
HIGHEST BALANCE DURING REPORTING PERIOD	Street address	
\$500 - \$1,000	City	
\$1,001 - \$10,000		
\$10,001 - \$100,000	Guarantor	
OVER \$100,000	Other	
	(Describe)	
Comments:		



### STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

**COVER PAGE** Please type or print in ink. NAME OF FILER (LAST) (MIDDLE) WORTH **JAMES** 1. Office, Agency, or Court Agency Name (Do not use acronyms) SEE ATTACHMENT 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 ☐ Judge or Court Commissioner (Statewide Jurisdiction) Multi-County \_\_\_\_\_ County of \_\_\_\_\_ City of \_\_\_\_\_ Other \_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2017, through Leaving Office: Date Left \_\_\_\_/\_\_\_ December 31, 2017. (Check one) -or-The period covered is \_\_\_\_/\_\_\_, through O The period covered is January 1, 2017, through the date of December 31, 2017. leaving office. -or-Assuming Office: Date assumed \_\_\_\_/\_ O The period covered is \_\_ the date of leaving office. ☐ Candidate: Date of Election \_\_\_ \_\_\_ 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 STATE ZIP CODE (Business or Agency Address Recommended - Public Document) 2001 22nd Street, Suite 100 Bakersfield CA 93301 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (661) 322-4417 jim@mcmurtreyhartsock.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. March 14, 2018 Date Signed \_

Signature

(month, day, year)

(File the originally signed statement with your filing official.)

### FORM 700 – COVER PAGE ATTACHMENT

#### JAMES A. WORTH

and Tulare

1.	Office, Agency, or Court/Position 2.	Jurisdiction of Office
	Boron Community Services District, District Counsel	County of Kern
	Buena Vista Water Storage District, District Counsel	County of Kern
	Cawelo Water District, District Counsel	County of Kern
	East Niles Community Services District, District Counsel	County of Kern
	Golden Empire Transit District, District Counsel	County of Kern
	Henry Miller Water District, District Counsel	County of Kern
	Indian Wells Valley Groundwater Authority, District Counsel	Counties of Kern, Inyo and San Bernardino
	Indian Wells Valley Water District, District Counsel	Counties of Kern and San Bernardino
	Kern Delta Water District, District Counsel	County of Kern
	Kern Fan Authority, District Counsel	County of Kern
	Mojave Public Utility District, District Counsel	County of Kern
	Olcese Water District, District Counsel	County of Kern
	Quail Valley Water District, District Counsel	County of Kern
	Rosedale-Rio Bravo Water Storage District, District Counsel	County of Kern
	Consolidated Central Valley Table Grape Pest & Disease Control District, District Counsel	Counties of Kern

#### 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
JAMES A. WORTH

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
McMURTREY, HARTSOCK & WORTH	
Name 2001 22nd Street, Suite 100, Bakersfield, CA 93301 Address (Business Address Acceptable)	Name 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  Law Office	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000   J_17   J_17	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:     \$0 - \$1,999     \$2,000 - \$10,000     \$10,001 - \$1,000,000     \$100,001 - \$1,000,000     Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Corporation Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Secretary	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 TO THE ENTITY/TRUST)
\$0 - \$499	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
None or Names listed below	None or Names listed below
SEE ATTACHMENT	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ 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, or 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:   \$2,000 - \$10,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$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

#### FORM 700 - SCHEDULE A-2 ATTACHMENT

#### JAMES A. WORTH

#### 1. <u>Business Entity or Trust</u>:

McMurtrey, Hartsock & Worth

#### 3. <u>List Each Reportable Source of Income/Loans of \$10,000 or More:</u>

Buena Vista Water Storage District
Cawelo Water District
East Niles Community Services District
Golden Empire Transit District
Henry Miller Water District
Indian Wells Valley Groundwater Authority
Indian Wells Valley Water District
Kern Delta Water District
Kern Fan Authority
Mojave Public Utility District
Oildale Mutual Water Company
Olcese Water District
Rosedale-Rio Bravo Water Storage District

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	700 ommission
Name	
JAMES A. WORTH	

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
McMURTREY, HARTSOCK & WORTH	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2001 22nd Street, Suite 100, Bakersfield, CA 93301	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Office	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Attorney / Secretary of Corporation	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 X OVER \$100,000	S10,001 - \$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	Other
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD	(Describe)
* You are not required to report loans from commercial ler retail installment or credit card transaction, made in the members of the public without regard to your official stat regular course of business must be disclosed as follows  NAME OF LENDER*	nding institutions, or any indebtedness created as part of a lender's regular course of business on terms available to tus. Personal loans and loans received not in a lender's :  INTEREST RATE  TERM (Months/Years)
	TENM (Mondis/Teals)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
	Other(Describe)
	(Describe)
Comments:	



Date Initial Filing Received Official Use Only

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
ST. LAWRENCE	ISAAC	LEE
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
SEE ATTACHMENT		
Division, Board, Department, District, if applied	cable Your Pos	sition
▶ If filing for multiple positions, list below or	r on an attachment. (Do not use acronyms)	
Agency:	Position	n:
2. Jurisdiction of Office (Check at le	ast one box)	
☐ State		or Court Commissioner (Statewide Jurisdiction)
☐ Multi-County		y of
City of		
	Utner	
3. Type of Statement (Check at least of	one box)	
Annual: The period covered is January December 31, 2017.		ng Office: Date Left/
The period covered is/. December 31, 2017.		ne period covered is January 1, 2017, through the date of aving office.
Assuming Office: Date assumed	_// O Th	ne period covered is/, through e date of leaving office.
Candidate: Date of Election	and office sought, if different than	Part 1:
4. Schedule Summary (must comp	plete) ► Total number of pages inc	cluding this cover page:5
Schedules attached		January Transfer
Schedule A-1 - Investments - sched	ule attached Schedule C -	Income, Loans, & Business Positions – schedule attached
Schedule A-2 - Investments - sched		Income – Gifts – schedule attached
☐ Schedule B - Real Property - sched		Income - Gifts - Travel Payments - schedule attached
-or-		
☐ <b>None -</b> No reportable interests of	on any schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Do	CITY cument)	STATE ZIP CODE
2001 22nd Street, Suite 100	Bakersfield	CA 93301
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS	
( 661 ) 322-4417		murtreyhartsock.com
nerein and in any attached schedules is true	and complete. I acknowledge this is a public d	
I certify under penalty of perjury under the	e laws of the State of California that the fore	going is true and correct.
Date Signed March 14, 2018	Signature	) A:
(month, day, year)		(File the originally signed statement with your filing official.)

#### **FORM 700 – COVER PAGE ATTACHMENT**

#### ISAAC L. ST. LAWRENCE

1.	Office, Agency, or Court/Position 2.	Jurisdiction of Office
	Boron Community Services District, District Counsel	County of Kern
	Buena Vista Water Storage District, District Counsel	County of Kern
	Cawelo Water District, District Counsel	County of Kern
	East Niles Community Services District, District Counsel	County of Kern
	Golden Empire Transit District, District Counsel	County of Kern
	Henry Miller Water District, District Counsel	County of Kern
	Indian Wells Valley Groundwater Authority, District Counsel	Counties of Kern, Inyo and San Bernardino
	Indian Wells Valley Water District, District Counsel	Counties of Kern and San Bernardino
	Kern Delta Water District, District Counsel	County of Kern
	Kern Fan Authority, District Counsel	County of Kern
	Mojave Public Utility District, District Counsel	County of Kern
	Olcese Water District, District Counsel	County of Kern
	Quail Valley Water District, District Counsel	County of Kern
	Rosedale-Rio Bravo Water Storage District, District Counsel	County of Kern
	Consolidated Central Valley Table Grape Pest & Disease Control District, District Counsel	Counties of Kern and Tulare

#### **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
ISAAC L. ST. LAWRENCE

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
McMURTREY, HARTSOCK & WORTH	
Name 2001 22nd Street, Suite 100, Bakersfield, CA 93301	Name
Address (Business Address Acceptable)	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  Law Office	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000   /	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 X Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 X OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below  SEE ATTACHMENT.	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None or Names listed below
► 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 or 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:   \$2,000 - \$10,000   / 17   / 17   / 17     17     17   18   100,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
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

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
ISAAC L. ST. LAWRENCE

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
McMURTREY, HARTSOCK & WORTH	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2001 22nd Street, Suite 100, Bakersfield, CA 93301	( and the second
BUSINESS ACTIVITY, IF ANY, OF SOURCE	DUCINESS ACTIVITY IF ANY OF SOURCE
Law Office	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Community of the Management of	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Attorney / Treasurer of Corporation	
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 X 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	☐ Salary ☐ Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)	(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 (Real property, car, boat, etc.)	Sale of(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	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 PER	IOD
retail installment or credit card transaction, made in the	nding institutions, or any indebtedness created as part of a lender's regular course of business on terms available to itus. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Dississes Address Association)	% None
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
DOGINEGO ACTIVITI, IL ANTI, OF LENDER	
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
S500 - \$1,000	
	Cit.
\$1,001 - \$10,000	City
\$1,001 - \$10,000 \$10,001 - \$100,000	City  Guarantor
S10,001 - \$100,000	
	Guarantor
S10,001 - \$100,000	Guarantor
S10,001 - \$100,000	Guarantor



Date Initial Filing Received Official Use Only

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
RAYTIS	DANIEL	N.
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
SEE ATTACHMENT		
Division, Board, Department, District, if a	applicable Your Positi	ion
▶ If filing for multiple positions, list belo	ow or on an attachment. (Do not use acronyms)	
Agency:	Position: _	
2. Jurisdiction of Office (Check a	at least one boy)	
State		Court Commission (O) to the best to the
☐ Multi-County		Court Commissioner (Statewide Jurisdiction)
		f
City of	Other	
3. Type of Statement (Check at le	ast one box)	
Annual: The period covered is Jan December 31, 2017.		Office: Date Left/one)
		period covered is January 1, 2017, through the date of ang office.
Assuming Office: Date assumed		period covered is/, through ate of leaving office.
Candidate: Date of Election	and office sought, if different than Pa	art 1:
4. Schedule Summary (must co	omplete) Total number of pages inch	odina dhia aasaa 5
Schedules attached	omplete) ► Total number of pages inclu	dung this cover page:
Schedule A-1 - Investments – so	chedule attached	nome Lagra & During B. III
Schedule A-2 - Investments – so		come, Loans, & Business Positions – schedule attached come – Gifts – schedule attached
Schedule B - Real Property - so		come – Gifts – Travel Payments – schedule attached
-or-		water, aymone conduit allagrica
☐ <b>None -</b> No reportable interes	ats on any schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Publ	CITY	STATE ZIP CODE
2001 22nd Street, Suite 100	Bakersfield	CA 93301
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS	33001
( 661 ) 322-4417		treyhartsock.com
I have used all reasonable diligence in pri herein and in any attached schedules is	eparing this statement. I have reviewed this statement true and complete. I acknowledge this is a public doc	and to the best of my knowledge the information contained ument.
I certify under penalty of perjury under	r the laws of the State of California that the forego	ing is true and correct.
Date Signed March 14, 2018	Signature	2 Kety
(month, day, year	Signature	(File the originally signed statement with your filing official.)

### FORM 700 – COVER PAGE ATTACHMENT

#### DANIEL N. RAYTIS

Tulare

1.	Office, Agency, or Court/Position 2.	Jurisdiction of Office
	Boron Community Services District, District Counsel	County of Kern
	Buena Vista Water Storage District, District Counsel	County of Kern
	Cawelo Water District, District Counsel	County of Kern
	East Niles Community Services District, District Counsel	County of Kern
	Golden Empire Transit District, District Counsel	County of Kern
	Henry Miller Water District, District Counsel	County of Kern
	Indian Wells Valley Groundwater Authority, District Counsel	Counties of Kern, Inyo and San Bernardino
	Indian Wells Valley Water District, District Counsel	Counties of Kern and San Bernardino
	Kern Delta Water District, District Counsel	County of Kern
	Kern Fan Authority, District Counsel	County of Kern
	Mojave Public Utility District, District Counsel	County of Kern
	Olcese Water District, District Counsel	County of Kern
	Quail Valley Water District, District Counsel	County of Kern
	Rosedale-Rio Bravo Water Storage District, District Counsel	County of Kern
	Consolidated Central Valley Table	Counties of Kern and

Grape Pest & Disease Control District, District Counsel

#### 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
DANIEL N. RAYTIS

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
McMURTREY, HARTSOCK & WORTH	
Name	Name
2001 22nd Street, Suite 100, Bakersfield, CA 93301	
Address (Business Address Acceptable)	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  Law Office	GENERAL DESCRIPTION OF THIS BUSINESS
Law Office	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$2,000 - \$10,000//17 / 17	□ \$0 - \$1,999
\$2,000 - \$10,000	\$2,000 - \$10,000/
¥ \$100,001 - \$1,000,000	\$10,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Corporation	Partnership Sole Proprietorship
Other	Other
YOUR BUSINESS POSITION Vice President	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA	A DENTIFY THE OPENS MANUAL TOTAL
SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
S500 - \$1,000 X OVER \$100,000	\$500 - \$1,000 OVER \$100,000
☐ \$1,001 - \$10,000	\$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
None or Names listed below	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary,)  None or Names listed below
	None or Names listed below
SEE ATTACHMENT	
NA INDICATED TO AND INTERPORT IN THE	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
and the second s	Assessor's Parcer Number of Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$\begin{align*} \\$2,000 - \$10,000 \\ \\$10,001 - \$100,000 \\ \end{align*} \end{align*} \end{align*} \end{align*} \end{align*} \end{align*} \end{align*}	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
Over \$1,000,000	\$1,000,001 - \$1,000,000 ACQUIRED DISPOSED  Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
□ Leasehold □ □ □	
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:	FPPC Form 700 (2017/2018) Sch. A-2

#### FORM 700 - SCHEDULE A-2 ATTACHMENT

#### DANIEL N. RAYTIS

#### 1. Business Entity or Trust:

McMurtrey, Hartsock & Worth

#### 3. <u>List Each Reportable Source of Income/Loans of \$10,000 or More:</u>

Buena Vista Water Storage District
Cawelo Water District
East Niles Community Services District
Golden Empire Transit District
Henry Miller Water District
Indian Wells Valley Groundwater Authority
Indian Wells Valley Water District
Kern Delta Water District
Kern Fan Authority
Mojave Public Utility District
Oildale Mutual Water Company
Olcese Water District
Rosedale-Rio Bravo Water Storage District

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
DANIEL N. RAYTIS

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
McMURTREY, HARTSOCK & WORTH	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2001 22nd Street, Suite 100, Bakersfield, CA 93301	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Office	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Attorney / Vice President of Corporation	
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
\$10,001 - \$100,000 X 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.)	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(Descrite)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	(Describe)
* You are not required to report loans from commercial le retail installment or credit card transaction, made in the	nding institutions, or any indebtedness created as part of a lender's regular course of business on terms available to tus. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	
	City
\$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other
	(Describe)
Comments:	
Comments.	