

COVER PAGE

Please type or print in ink.

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

Board of Directors

Your Position

President

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

State

Multi-County _____

City of _____

Judge or Court Commissioner (Statewide Jurisdiction)

County of Kern

Other _____

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

Annual: The period covered is January 1, 2017, through December 31, 2017.

-or-

The period covered is ____/____/____, through December 31, 2017.

Assuming Office: Date assumed 07/28/2018

Leaving Office: Date Left ____/____/____ (Check one)

The period covered is January 1, 2017, through the date of leaving office.

-or-

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 complete) ► Total number of pages including this cover page: 01

Schedules attached

Schedule A-1 - Investments – schedule attached

Schedule A-2 - Investments – schedule attached

Schedule B - Real Property – 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
<i>(Business or Agency Address Recommended - Public Document)</i>				
10047 Pretoria Road	Tehachapi	CA	93561	

DAYTIME TELEPHONE NUMBER

(661) 810-5593

E-MAIL ADDRESS

m.biglay@aol.com

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 9-29-18
 (month, day, year)

Signature *Michael Joseph Biglay*
 (File the originally signed statement with your filing official.)

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
HARDENBROOK RANDY DEE

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

QUAIL VALLEY WATER DISTRICT

Division, Board, Department, District, if applicable

Your Position

GENERAL MANAGER

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of PORTION OF KERN
- 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 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 complete) ► Total number of pages including this cover page: 4

Schedules attached

- Schedule A-1 - Investments** – schedule attached
- Schedule A-2 - Investments** – schedule attached
- Schedule B - Real Property** – 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)
24750 SAND CANYON ROAD TEHACHAPI CA 93561
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(661) 822-1923 RANDY@QVWD.ORG

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/1/18
(month, day, year)

Signature _____
(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)

Name
RANDY D. HARDENBROOK

► 1. BUSINESS ENTITY OR TRUST

RANDY HARDENBROOK
Name
24630 NYAMAZI CT, TEHACHAPI CA
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
REPAIR AND MAINTENANCE SERVICES

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$0 - \$1,999		
<input checked="" type="checkbox"/> \$2,000 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000	ACQUIRED	DISPOSED

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____ Other

YOUR BUSINESS POSITION OWNER

► 1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$0 - \$1,999		
<input type="checkbox"/> \$2,000 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000	ACQUIRED	DISPOSED

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____ Other

YOUR BUSINESS POSITION _____

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$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.)
 None or Names listed below

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if 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

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000	ACQUIRED	DISPOSED

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____
 Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

► 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, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:	
<input type="checkbox"/> \$2,000 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000	ACQUIRED	DISPOSED

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____
 Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
RANDY D. HARDENBROOK

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
224-010-50-00-0

CITY
TEHACHAPI

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000 / /17 / /17
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
459-171-02-00-7

CITY
TEHACHAPI

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000 / /17 / /17
 \$100,001 - \$1,000,000 ACQUIRED DISPOSED
 Over \$1,000,000

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$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

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course 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 _____
HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER* _____
ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF LENDER _____
INTEREST RATE TERM (Months/Years)
_____ % None _____
HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 RANDY D. HARDENBROOK

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 CULLEN INSURANCE AGENCY

ADDRESS (Business Address Acceptable)
 2271 E. PALMDALE BLVD, STE F, PALMDALE CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 INSURANCE AGENCY

YOUR BUSINESS POSITION
 NONE

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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)

Other _____
 (Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 QUAIL VALLEY WATER DISTRICT

ADDRESS (Business Address Acceptable)
 24750 SAND CANYON ROAD, TEHACHAPI, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION
 GENERAL MANAGER

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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)

Other _____
 (Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

INTEREST RATE _____% None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence

Real Property _____
 Street address _____
 City _____

Guarantor _____

Other _____
 (Describe)

Comments: _____

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
 Official Use Only

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
 DAGGETT MATTHEW PHILIP

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 BOARD MEMBER

▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of PORTION OF KERN
- Other _____

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

- Annual:** The period covered is January 1, 2017, through December 31, 2017.
- or-
- The period covered is _____, through December 31, 2017.
- Assuming Office:** Date assumed _____
- Candidate:** Date of Election _____ and office sought, if different than Part 1: _____
- Leaving Office:** Date Left _____ (Check one)
- The period covered is January 1, 2017, through the date of leaving office.
- or-
- The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: _____

Schedules attached

- Schedule A-1 - Investments** – schedule attached
- Schedule A-2 - Investments** – schedule attached
- Schedule B - Real Property** – 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)
 24750 SAND CANYON RD TEHACHAPS 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 reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 02/24/2018 Signature [Signature]
 (month, day, year) (File the originally signed statement with your filing official.)

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
LEONARD RITA L

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

QUAIL VALLEY WATER DISTRICT

Division, Board, Department, District, if applicable

Your Position

BOARD

► If filing for multiple positions, list below or on an attachment. (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 _____

County of KERN (Portion 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)

-or-

The period covered is ____/____/____, through December 31, 2017.

The period covered is January 1, 2017, through the date of leaving office.

-or-

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 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)

24750 SAND CANYON ROAD TEHACHAPI, CA, 93561

DAYTIME TELEPHONE NUMBER

E-MAIL ADDRESS

(661) 822-1923

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

February 8, 2018
(month, day, year)

Signature

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

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) LOPEZ (FIRST) ENRIQUE (MIDDLE) S

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

QUAIL VALLEY WATER DISTRICT
Division, Board, Department, District, if applicable BOARD Your Position

▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of Portion KERN
- Other _____

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

- Annual: The period covered is January 1, 2017, through December 31, 2017.
- or-
- The period covered is _____, through December 31, 2017.
- Assuming Office: Date assumed _____
- Candidate: Date of Election _____ and office sought, if different than Part 1: _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2017, through the date of leaving office.
- or-
- The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: _____

Schedules attached

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- 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)
2326 W 166th ST TORRANCE CA 90505

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS

(310) 225 5659 macsaSha2@Att.net

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2-20-2018
(month, day, year)

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

COVER PAGE

Please type or print in ink.

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 Your Position
 Board Secretary/Treasurer

► 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 PORTION OF KERN
 City of _____ Other _____

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

Annual: The period covered is January 1, 2017, through December 31, 2017.
 -or- The period covered is _____, through December 31, 2017.
 Assuming Office: Date assumed _____
 Candidate: Date of Election _____ and office sought, if different than Part 1: _____
 Leaving Office: Date Left _____ (Check one)
 The period covered is January 1, 2017, through the date of leaving office.
 -or-
 The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete)

► Total number of pages including this cover page: 1

Schedules attached

Schedule A-1 - Investments – schedule attached **Schedule C - Income, Loans, & Business Positions** – schedule attached
 Schedule A-2 - Investments – schedule attached **Schedule D - Income – Gifts** – schedule attached
 Schedule B - Real Property – schedule attached **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-
 None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
 (Business or Agency Address Recommended - Public Document)
 24750 Sand Canyon Road Tehachapi Calif 93561
 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
 (661) 822-1923 Richard@qvwd.org

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed January 31st 2018
 (month, day, year)

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

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Please type or print in ink.

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 applicable

Your Position

Director

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of Portion of Kern
- Other _____

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

- Annual:** The period covered is January 1, 2017, through December 31, 2017.
- or-
- The period covered is ____/____/____, through December 31, 2017.
- Assuming Office:** Date assumed ____/____/____
- Candidate:** Date of Election _____ and office sought, if different than Part 1: _____
- Leaving Office:** Date Left ____/____/____ (Check one)
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- or-
- The period covered is ____/____/____, through the date of leaving office.

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- 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)

24750 Sand Canyon RD, Tehachapi, CA 93567

DAYTIME TELEPHONE NUMBER

(661) 822-1923

E-MAIL ADDRESS

dsims@qvwed.org

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 01/25/2018
(month, day, year)

Signature Richard D Sims
(File the originally signed statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received Official Use Only

COVER PAGE

Please type or print in ink.

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 applicable
Your Position
Director

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position:

2. Jurisdiction of Office (Check at least one box)

- State
Multi-County
City of
Judge or Court Commissioner (Statewide Jurisdiction)
County of Portion of Kern
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
Assuming Office: Date assumed
Candidate: Date of Election

4. Schedule Summary (must complete) Total number of pages including this cover page:

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None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
24750 Sand Canyon RD, Tehachapi, CA 93567

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(661) 822-1923 dsims@qvwd.org

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 01/25/2018
(month, day, year)

Signature Richard D. Sims
(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

2001 22ND STREET, SUITE 100
BAKERSFIELD, CALIFORNIA 93301

AREA CODE 661
TELEPHONE 322-4417
FAX 322-8123

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

COVER PAGE

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

Please type or print in ink.

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: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

State Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County Kern, Tulare 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.
-or- The period covered is ____/____/____, through December 31, 2017.
 Assuming Office: Date assumed ____/____/____
 Leaving Office: Date Left ____/____/____ (Check one)
○ The period covered is January 1, 2017, through the date of leaving office.
-or-
○ 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 complete) ► Total number of pages including this cover page: 11

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)
2001 22nd St Ste 100 Bakersfield CA 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.

Date Signed 03/06/2018 02:52 PM Signature Electronic Submission
(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)

Name
Gene McMurtrey

▶ 1. BUSINESS ENTITY OR TRUST

McMurtrey, Hartsock & Worth
Name
2001 22nd Street, Bakersfield, CA 93301
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Law Firm

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 _____/_____/17 _____/_____/17
 \$2,000 - \$10,000 _____/_____/17 _____/_____/17
 \$10,001 - \$100,000 _____/_____/17 _____/_____/17
 \$100,001 - \$1,000,000 _____/_____/17 _____/_____/17
 Over \$1,000,000 _____/_____/17 _____/_____/17
ACQUIRED DISPOSED

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Corporation
Other _____

YOUR BUSINESS POSITION Employee

▶ 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 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.)

None or Names listed below
SEE ATTACHED

▶ 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, or Assessor's Parcel Number or Street Address 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
 \$10,001 - \$100,000 _____/_____/17 _____/_____/17
 \$100,001 - \$1,000,000 _____/_____/17 _____/_____/17
 Over \$1,000,000 _____/_____/17 _____/_____/17
ACQUIRED DISPOSED

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold _____ Other _____
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Mark Properties
Name
2001 22nd Street, Bakersfield, CA 93301
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Real Estate

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 _____/_____/17 _____/_____/17
 \$2,000 - \$10,000 _____/_____/17 _____/_____/17
 \$10,001 - \$100,000 _____/_____/17 _____/_____/17
 \$100,001 - \$1,000,000 _____/_____/17 _____/_____/17
 Over \$1,000,000 _____/_____/17 _____/_____/17
ACQUIRED DISPOSED

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other
Other _____

YOUR BUSINESS POSITION Partner

▶ 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 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.)

None or Names listed below
McMurtrey, Hartsock & Worth

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Office Building
Name of Business Entity, if Investment, or 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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/17 _____/_____/17
 \$10,001 - \$100,000 _____/_____/17 _____/_____/17
 \$100,001 - \$1,000,000 _____/_____/17 _____/_____/17
 Over \$1,000,000 _____/_____/17 _____/_____/17
ACQUIRED DISPOSED

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold _____ Other _____
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

Name
Gene McMurtrey

▶ 1. BUSINESS ENTITY OR TRUST

4M Investments
Name
275 Panorama Drive, Bakersfield, CA 93305
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Real Estate Rental

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 01/01/17 / /17
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____ Other

YOUR BUSINESS POSITION Partner

▶ 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 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.)

None or Names listed below
Car Quest Auto Parts
Treasure Trove
AAMCO
PuroClean

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

SEE ATTACHED

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Rental 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
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 / /17 / /17
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____ Other

YOUR BUSINESS POSITION _____

▶ 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 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.)

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

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address 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
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE A-2

Attachment

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>Gene McMurtrey</u>

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
040-190-07 = fmv between \$100,000 - \$1,000,000
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

SCHEDULE B
Interests in Real Property
(Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
Gibson & Commercial
CITY
Bakersfield, CA 93301
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000
ACQUIRED / /17 DISPOSED / /17
NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold Yrs. remaining Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
6000 C Auburn Street
CITY
Bakersfield, CA 93305
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000
ACQUIRED / /17 DISPOSED / /17
NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold Yrs. remaining Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$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

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course 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
HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
 % None
HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

Name
Gene McMurtrey

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
6008 B Auburn Street
 CITY
Bakersfield, CA 93305

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 17 DISPOSED / / 17

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Yrs. remaining _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
6008 C Auburn Street
 CITY
Bakersfield, CA 93305

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

ACQUIRED / / 17 DISPOSED / / 17

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Yrs. remaining _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$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

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course 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

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER* _____
 ADDRESS (Business Address Acceptable) _____
 BUSINESS ACTIVITY, IF ANY, OF LENDER _____
 INTEREST RATE _____ % TERM (Months/Years) _____
 None

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

Gene McMurtrey

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
1019 Panorama Drive
CITY
Bakersfield, CA 93305
FAIR MARKET VALUE
IF APPLICABLE, LIST DATE:
01/01/17
NATURE OF INTEREST
Ownership/Deed of Trust
IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499
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

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
4700 SandyLand, #22
CITY
Carpenteria, CA
FAIR MARKET VALUE
IF APPLICABLE, LIST DATE:
NATURE OF INTEREST
Ownership/Deed of Trust
IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$1,001 - \$10,000
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

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course 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)
HIGHEST BALANCE DURING REPORTING PERIOD
Guarantor, if applicable

NAME OF LENDER*
ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE
TERM (Months/Years)
HIGHEST BALANCE DURING REPORTING PERIOD
Guarantor, if applicable

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
Gene McMurtrey

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
38942 Lake Point Court

CITY
Bass Lake, CA

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 _____/_____/17 _____/_____/17
 ACQUIRED DISPOSED

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Yrs. remaining _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$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

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
12646 Cattle King Drive

CITY
Bakersfield, CA 93306

FAIR MARKET VALUE
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 _____/_____/17 _____/_____/17
 ACQUIRED DISPOSED

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____ Yrs. remaining _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
 \$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

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course 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 _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% None _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

Guarantor, if applicable

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

Name
 Gene McMurtrey

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 McMurtrey, Hartsock & Worth

ADDRESS (Business Address Acceptable)
 2001 22nd Street, Bakersfield, CA 93301

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Legal Services

YOUR BUSINESS POSITION
 Employee

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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)

Other _____
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 Mark Properties

ADDRESS (Business Address Acceptable)
 2001 22nd Street, Bakersfield, CA 93301

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Real Estate

YOUR BUSINESS POSITION
 Partner

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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
 McMurtrey, Hartsock & Worth - Tenant

 (Describe)

Other _____
 (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

INTEREST RATE _____% None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
 Street address _____
 City _____

Guarantor _____

Other _____
 (Describe)

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

Name
 Gene McMurtrey

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
4M Investments

ADDRESS (Business Address Acceptable)
275 Panorama Drive, Bakersfield, CA 93305

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate

YOUR BUSINESS POSITION
Partner

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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
Car Quest Auto Parts - Tenant
 (Describe)
 Other _____
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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)
 Other _____
 (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

INTEREST RATE _____ % None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
 Street address _____
 City _____
 Guarantor _____
 Other _____
 (Describe)

Comments: _____

COVER PAGE

Please type or print in ink.

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 Position

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position:

2. Jurisdiction of Office (Check at least one box)

- State, Multi-County, City of, Judge or Court Commissioner (Statewide Jurisdiction), County of, Other

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

- Annual: The period covered is January 1, 2017, through December 31, 2017.
-or- The period covered is ... through December 31, 2017.
Assuming Office: Date assumed
Candidate: Date of Election
Leaving Office: Date Left
-or- The period covered is January 1, 2017, through the date of leaving office.
-or- The period covered is ... through the date of leaving office.

4. Schedule Summary (must complete) Total number of pages including this cover page: 7

Schedules attached

- Schedule A-1 - Investments - schedule attached
Schedule A-2 - Investments - schedule attached
Schedule B - Real Property - 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)

2001 22nd Street, Suite 100 Bakersfield CA 93301

DAYTIME TELEPHONE NUMBER

(661) 322-4417

E-MAIL ADDRESS

robert@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.

Date Signed March 14, 2018 (month, day, year)

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

**FORM 700 – COVER PAGE
ATTACHMENT**

ROBERT W. HARTSOCK

1. <u>Office, Agency, or Court/Position</u>	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 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-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
IBM
GENERAL DESCRIPTION OF THIS BUSINESS
Computers/Electronics
FAIR MARKET VALUE
[X] \$2,000 - \$10,000
NATURE OF INVESTMENT
[X] Stock

NAME OF BUSINESS ENTITY
DOW CHEMICAL
GENERAL DESCRIPTION OF THIS BUSINESS
Chemical Company
FAIR MARKET VALUE
[X] \$10,001 - \$100,000
NATURE OF INVESTMENT
[X] Stock

NAME OF BUSINESS ENTITY
DISNEY
GENERAL DESCRIPTION OF THIS BUSINESS
Amusement
FAIR MARKET VALUE
[X] \$2,000 - \$10,000
NATURE OF INVESTMENT
[X] Stock

NAME OF BUSINESS ENTITY
INTEL
GENERAL DESCRIPTION OF THIS BUSINESS
Computer Parts
FAIR MARKET VALUE
[X] \$10,001 - \$100,000
NATURE OF INVESTMENT
[X] Stock

NAME OF BUSINESS ENTITY
HARLEY DAVIDSON
GENERAL DESCRIPTION OF THIS BUSINESS
Motorcycle Mfr.
FAIR MARKET VALUE
[X] \$10,001 - \$100,000
NATURE OF INVESTMENT
[X] Stock

NAME OF BUSINESS ENTITY
PEPSICO
GENERAL DESCRIPTION OF THIS BUSINESS
Food Company
FAIR MARKET VALUE
[X] \$10,001 - \$100,000
NATURE OF INVESTMENT
[X] Stock

Comments:

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
MICROSOFT

GENERAL DESCRIPTION OF THIS BUSINESS
Computer Programs

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
YUM

GENERAL DESCRIPTION OF THIS BUSINESS
Foods

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
QUALCOMM

GENERAL DESCRIPTION OF THIS BUSINESS
Internet

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
AMAZON

GENERAL DESCRIPTION OF THIS BUSINESS
Internet Business

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 <small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name ROBERT W. HARTSOCK

▶ 1. BUSINESS ENTITY OR TRUST

McMURTREY, HARTSOCK & WORTH
Name
2001 22nd Street, Suite 100, Bakersfield, CA 93301
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS	
<u>Law Office</u>	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	
<input type="checkbox"/> \$2,000 - \$10,000	<u> </u> / <u> </u> / <u> </u> <u>17</u> <u> </u> / <u> </u> / <u> </u> <u>17</u>
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> <u>Corporation</u> Other _____	
YOUR BUSINESS POSITION <u>President</u>	

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input checked="" type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$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.)

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:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	<u> </u> / <u> </u> / <u> </u> <u>17</u> <u> </u> / <u> </u> / <u> </u> <u>17</u>
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold _____	<input type="checkbox"/> Other _____
Yrs. remaining	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

▶ 1. BUSINESS ENTITY OR TRUST

MARK PROPERTIES
Name
2001 22nd Street, Bakersfield, CA 93301
Address (Business Address Acceptable)
Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	
<input type="checkbox"/> \$2,000 - \$10,000	<u> </u> / <u> </u> / <u> </u> <u>17</u> <u> </u> / <u> </u> / <u> </u> <u>17</u>
<input checked="" type="checkbox"/> \$10,001 - \$100,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> _____ Other _____	
YOUR BUSINESS POSITION _____	

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input checked="" type="checkbox"/> \$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.)

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

2001 22nd Street
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Bakersfield, CA 93301
Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input checked="" type="checkbox"/> \$10,001 - \$100,000	<u> </u> / <u> </u> / <u> </u> <u>17</u> <u> </u> / <u> </u> / <u> </u> <u>17</u>
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INTEREST	
<input checked="" type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
<input type="checkbox"/> Leasehold _____	<input type="checkbox"/> Other _____
Yrs. remaining	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

Comments: _____

**FORM 700 - SCHEDULE A-2
ATTACHMENT**

ROBERT W. HARTSOCK

1. Business Entity or Trust:

McMurtrey, Hartsock & Worth

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

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

ROBERT W. HARTSOCK

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

McMURTREY, HARTSOCK & WORTH

ADDRESS (Business Address Acceptable)

2001 22nd Street, Suite 100, Bakersfield, CA 93301

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Law Office

YOUR BUSINESS POSITION

Attorney / President of Corporation

GROSS INCOME RECEIVED No Income - Business Position Only

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

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)

Other _____

(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

MARK PROPERTIES

ADDRESS (Business Address Acceptable)

2001 22nd Street, Bakersfield, CA 93301

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Real Estate

YOUR BUSINESS POSITION

Partner

GROSS INCOME RECEIVED No Income - Business Position Only

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

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)

Other _____

(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

INTEREST RATE

_____% None

TERM (Months/Years)

SECURITY FOR LOAN

None

Personal residence

Real Property

Street address

City

Guarantor

Other

(Describe)

Comments: _____

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 WORTH JAMES A.

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 December 31, 2017.
 -or- The period covered is ____/____/____, through December 31, 2017.
 Assuming Office: Date assumed ____/____/____
 Candidate: Date of Election _____ and office sought, if different than Part 1: _____
 Leaving Office: Date Left ____/____/____ (Check one)
 The period covered is January 1, 2017, through the date of leaving office.
 -or-
 The period covered is ____/____/____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 5

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)
 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.

Date Signed March 14, 2018
 (month, day, year)

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

**FORM 700 – COVER PAGE
ATTACHMENT**

JAMES A. WORTH

1. <u>Office, Agency, or Court/Position</u>	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 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)

Name
JAMES A. WORTH

1. BUSINESS ENTITY OR TRUST
McMURTREY, HARTSOCK & WORTH
Name
2001 22nd Street, Suite 100, Bakersfield, CA 93301
Address (Business Address Acceptable)
Check one
[] Trust, go to 2 [x] Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS
Law Office
FAIR MARKET VALUE
[] \$0 - \$1,999
[] \$2,000 - \$10,000
[] \$10,001 - \$100,000
[x] \$100,001 - \$1,000,000
[] Over \$1,000,000
IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED
NATURE OF INVESTMENT
[] Partnership [] Sole Proprietorship [x] Corporation [] Other
YOUR BUSINESS POSITION Secretary

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

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

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, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE
[] \$2,000 - \$10,000
[] \$10,001 - \$100,000
[] \$100,001 - \$1,000,000
[] Over \$1,000,000
IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED
NATURE OF INTEREST
[] Property Ownership/Deed of Trust [] Stock [] Partnership
[] Leasehold _____ Yrs. remaining [] Other _____
[] Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST
Name
Address (Business Address Acceptable)
Check one
[] Trust, go to 2 [] Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE
[] \$0 - \$1,999
[] \$2,000 - \$10,000
[] \$10,001 - \$100,000
[] \$100,001 - \$1,000,000
[] Over \$1,000,000
IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED
NATURE OF INVESTMENT
[] Partnership [] Sole Proprietorship [] Other
YOUR BUSINESS POSITION

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 [] 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)
[] 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
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE
[] \$2,000 - \$10,000
[] \$10,001 - \$100,000
[] \$100,001 - \$1,000,000
[] Over \$1,000,000
IF APPLICABLE, LIST DATE:
____/____/17 ____/____/17
ACQUIRED DISPOSED
NATURE OF INTEREST
[] Property Ownership/Deed of Trust [] Stock [] Partnership
[] Leasehold _____ Yrs. remaining [] Other _____
[] Check box if additional schedules reporting investments or real property are attached

Comments:

**FORM 700 - SCHEDULE A-2
ATTACHMENT**

JAMES A. WORTH

1. Business Entity or Trust:

McMurtrey, Hartsock & Worth

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

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
JAMES A. WORTH

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
McMURTREY, HARTSOCK & WORTH

ADDRESS (Business Address Acceptable)
2001 22nd Street, Suite 100, Bakersfield, CA 93301

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Office

YOUR BUSINESS POSITION
Attorney / Secretary of Corporation

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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)

Other _____
(Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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)

Other _____
(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)		

BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Real Property _____ <i>Street address</i>	
<input type="checkbox"/> \$500 - \$1,000	_____	<i>City</i>
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Other _____ <i>(Describe)</i>	
<input type="checkbox"/> OVER \$100,000		

Comments: _____

COVER PAGE

Please type or print in ink.

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 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 December 31, 2017.
-or- The period covered is ____/____/____, through December 31, 2017.
- Leaving Office:** Date Left ____/____/____ (Check one)
 The period covered is January 1, 2017, through the date of leaving office.
- Assuming Office:** Date assumed ____/____/____
-or- 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 complete) ► Total number of pages including this cover page: 5

Schedules attached

- Schedule A-1 - Investments – schedule attached
 - Schedule A-2 - Investments – schedule attached
 - Schedule B - Real Property – 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)

2001 22nd Street, Suite 100 Bakersfield CA 93301

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS

(661) 322-4417 isaac@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.

Date Signed March 14, 2018
(month, day, year)

Signature 
(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 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

NAME OF SOURCE OF INCOME
 McMURTREY, HARTSOCK & WORTH

ADDRESS (Business Address Acceptable)
 2001 22nd Street, Suite 100, Bakersfield, CA 93301

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Law Office

YOUR BUSINESS POSITION
 Attorney / Treasurer of Corporation

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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)

Other _____
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED No Income - Business Position Only
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 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)

Other _____
 (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

INTEREST RATE _____% None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence

Real Property _____
 Street address _____
 City _____

Guarantor _____

Other _____
 (Describe)

Comments: _____

COVER PAGE

Please type or print in ink.

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 applicable

Your Position

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

- Annual:** The period covered is January 1, 2017, through December 31, 2017.
- or-
- The period covered is ____/____/____, through December 31, 2017.
- Assuming Office:** Date assumed ____/____/____
- Candidate:** Date of Election _____ and office sought, if different than Part 1: _____
- Leaving Office:** Date Left ____/____/____ (Check one)
- The period covered is January 1, 2017, through the date of leaving office.
- or-
- The period covered is ____/____/____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 5

Schedules attached

- Schedule A-1 - Investments – schedule attached
 - Schedule A-2 - Investments – schedule attached
 - Schedule B - Real Property – 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)
2001 22nd Street, Suite 100 Bakersfield CA 93301
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(661) 322-4417 dan@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.

Date Signed March 14, 2018
(month, day, year)

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

**FORM 700 – COVER PAGE
ATTACHMENT**

DANIEL N. RAYTIS

1. <u>Office, Agency, or Court/Position</u>	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 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)

Name
DANIEL N. RAYTIS

1. BUSINESS ENTITY OR TRUST

McMURTREY, HARTSOCK & WORTH

Name

2001 22nd Street, Suite 100, Bakersfield, CA 93301

Address (Business Address Acceptable)

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

Law Office

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	
<input type="checkbox"/> \$2,000 - \$10,000	___/___/17 ___/___/17
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Corporation
Other

YOUR BUSINESS POSITION Vice President

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 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.)

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:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	___/___/17 ___/___/17
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold ___ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$0 - \$1,999	
<input type="checkbox"/> \$2,000 - \$10,000	___/___/17 ___/___/17
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____
Other

YOUR BUSINESS POSITION _____

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 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.)

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

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	___/___/17 ___/___/17
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold ___ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

Comments: _____

**FORM 700 - SCHEDULE A-2
ATTACHMENT**

DANIEL N. RAYTIS

1. Business Entity or Trust:

McMurtrey, Hartsock & Worth

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

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

