

04/03/2023 11:56 AM

(month, day, year)

**Date Signed** 

## STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

Date Initial Filing Received
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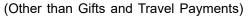
Filed Date: 04/03/2023 11:56 AM SAN: FPPC

AME OF FILER (LAST)	(FIRST)	(MIDDLE)
Sanchez	Jessica	
Office, Agency, or Court		
Agency Name (Do not use acron	yms)	
City of Mendota		
Division, Board, Department, District, if applicable		Your Position
		Planning Commissioner
► If filing for multiple positions, list	st below or on an attachment. (Do not us	_ <u> </u>
Agency:		Position:
Jurisdiction of Office (C	heck at least one box)	
State		<ul> <li>Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)</li> </ul>
Multi-County		County of
City of Mandata		Other
. Type of Statement (Chec	k at least one box)	
Annual: The period covered December 31, 2022		Leaving Office: Date Left//(Check one circle.)
-or- The period covered December 31, <b>2022</b>	is/, through 2.	<ul> <li>The period covered is January 1, 2022, through the date of leaving office.</li> </ul>
Assuming Office: Date ass	umed/	The period covered is/, through the date of leaving office.
Candidate: Date of Election	and office sough	nt, if different than Part 1:
Schedule Summary (rec Schedules attached  Schedule A-1 - Investment Schedule A-2 - Investment Schedule B - Real Proper	ots – schedule attached [ ots – schedule attached [	r of pages including this cover page:  Schedule C - Income, Loans, & Business Positions – schedule attached  Schedule D - Income – Gifts – schedule attached  Schedule E - Income – Gifts – Travel Payments – schedule attached
- <b>or-</b> 🗌 <b>None</b> - No reportab	le interests on any schedule	
. Verification		
MAILING ADDRESS STREE	ET CITY	STATE ZIP CODE
		EMAIL ADDRESS
DAYTIME TELEPHONE NUMBER		LIVINE ADDITEOU
I have used all reasonable diligend	ce in preparing this statement. I have reviules is true and complete. I acknowledge	iewed this statement and to the best of my knowledge the information contain

Signature

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

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



CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
	_

NAME OF COURSE OF INCOME	
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
540 N Augusta St, Fresno, CA 93701	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
Non-profit	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Unit Director	
GROSS INCOME RECEIVED	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.)	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	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
Other(Describe)  - 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING	Other(Describe)
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  * You are not required to report loans from a commercia a retail installment or credit card transaction, made in t	Other
* You are not required to report loans from a commercia a retail installment or credit card transaction, made in t to members of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER*	Other
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(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING  * You are not required to report loans from a commercia a retail installment or credit card transaction, made in t to members of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	Other