## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Please type or print in ink.

IAME OF FILER (LAST)	(FIRST)	(MIDDLE)
BANDA	NANCY	(MIDDLE)
. Office, Agency, or Cou	ırt	81934E11
Agency Name (Do not use acr	ronyms)	
CITY OF MENDOTA		
Division, Board, Department, Di	istrict, if applicable	Your Position
FINANCE		FINANCE DIRECTOR
▶ If filing for multiple positions, list below or on an attachment. (Do not use		e acronyms)
Agency: MENDOTA CON	MMUNITY CORPORATION	Position: CHIEF FINANCIAL OFFICER
. Jurisdiction of Office	(Check at least one box)	Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
		(Statewide Jurisdiction)
Multi-County		County of
		Other
City of MENDOTA		Other
City of MENDOTA  3. Type of Statement (Ch.  Annual: The period cove December 31, 2	heck at least one box) ered is January 1, 2022, through	
City of MENDOTA  3. Type of Statement (Characteristics)  Annual: The period cove December 31, 2	heck at least one box) ered is January 1, 2022, through 2022. ered is, through	Other  Leaving Office: Date Left

	Candidate: Date of Election and office so	ight, il dillerent than Part 1:
4.	Schedule Summary (required) ► Total num Schedules attached	ber of pages including this cover page:
	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	

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5.	Verification		

verification					
MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE	
(Business or Agency Address	s Recommended - Public Document)				_
DAYTIME TELEPHONE NUM	MBER	EMAIL ADDRESS			

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 unde	er penalty of perjury under the laws of the	State of California tha	
Date Signed	9/14/2023 (month, day, year)	Signatu	(I-lie/the onglyally signed paper statement with your lilling official.)