

## STATEMENT OF ECONOMIC INTERESTS Date Initial Filing Received **COVER PAGE** A PUBLIC DOCUMENT

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Please type or print in lnk. OF FILER (LAST) ₩0*19/* 1. Office, Agency, or Court Agency Name (Do not use acronyms) Under Congruction Educational Metrock Division, Board, Department, District, if applicable Your Position ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: 2. Jurisdiction of Office (Check at least one box) State Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) County of MONSeeve Multi-County \_ City of 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2022, through Leaving Office: Date Left \_ December 31, 2022. (Check one circle.) The period covered is \_\_\_\_\_/\_\_\_/ The period covered is January 1, 2022, through the date of leaving office. December 31, 2022. -or-The period covered is \_\_\_ Assuming Office: Date assumed \_\_\_\_/\_ the date of leaving office. and office sought, if different than Part 1:\_\_\_ Candidate: Date of Election 4. Schedule Summary (required) ► Total number of pages including this cover page: Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached -Or- None - No reportable interests on any schedule 5. Verification MAILING ADDRESS STREET CITY ZIP CODE (Business or Agency Address Recommended - Public Document) 150 main DAYTIME TELEPHONE NUMBER Stracuzzij@gmail. (om 1277.3328 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. certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. **Date Signed** Signature

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

(Other than Gifts and Travel Payments)

CALIFORNIA FORM FAIR POLITICAL PRACTICES	
Name	
Actual Control Control	

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
taylor tarmis	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
150 Main St. Salinas, CA-	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Communications Manager	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$2000	\$500 - \$1,000
	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, cer, bost, etc.)	(Real property, car, boet, str.)  Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental income, Est each source of \$10,000 or more
The state of the s	Solution of   Notice income, as each source of \$10,000 or more
(Describe)	(Describe)
Other(Describe)	Other
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	(Describe)
	ending institution, or any indebtedness created as part of
a retail installment or credit card transaction, made in th	
to members of the public without regard to your official s	tatus. 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 (Moinths/Years)
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
NAME OF LENDER*  ADDRESS (Business Address Acceptable)	
	INTEREST RATE TERM (Months/Years)
	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	INTEREST RATE TERM (Months/Years)  ———————————————————————————————————
ADDRESS (Business Address Acceptable)	INTEREST RATE TERM (Months/Years)  ———————————————————————————————————
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	INTEREST RATE TERM (Moinths/Years)  ———————————————————————————————————
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	INTEREST RATE TERM (Moinths/Years)  ———————————————————————————————————
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	INTEREST RATE TERM (Moinths/Years)
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	INTEREST RATE TERM (Moinths/Years)