## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESCEIVED

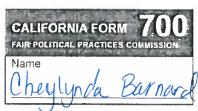
**COVER PAGE** 

17 MAR -7 AM 10: 16

Please type or print in ink	tt mm.
Barnard Cheulus	da (MIDDLE)
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)  Novewo Vally City Co  Division, Board, Department, District, if applicable	Your Position
MStrict 4	City Council
▶ If filling for multiple positions, list below or on an attachment. (Do not	
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	County of
Pairy of Noveno Valley	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2016, through December 31, 2016.	Leaving Office: Date Left/(Check one)
The period covered is/, through December 31, 2016.	The period covered is January 1, 2016, through the date of leaving office.
Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.
Candidate: Election year 2017 and office sought,	if different than Part 1:
	er of pages including this cover page:
Schedules attached	. (
Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
<ul> <li>☐ Schedule A-2 - Investments - schedule attached</li> <li>☐ Schedule B - Real Property - schedule attached</li> </ul>	Schedule D • Income — Gifts — schedule attached
-Of-	Schedule E - Income - Gifts - Travel Payments - schedule attached
☐ <b>None</b> - No reportable interests on any schedule	
5. Verification	
DAYTME TELEPHONE NUMBER	STATE ZIP COCE  92 553  SMAIL ACCRESS  A PROMOTE TO THE PROMOTE TO
I certify under penalty of perjury under the laws of the State of Califo	omia that the foregoing is true and correct.
Date Signed 03/7/17	Signature

## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)



► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
County of Priverside	Southwest Airlines
ADDRESS (Butiness Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY IF ANY, OF SOURCE	2702 Loverfield dr. Vallas, TX 7523 BUSINESS ACTIVITY IF ANY, OF SOURCE
Social Services	Airline Carrier
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Social Worker	Trainer
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000   \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SQNSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Scouse'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 poet etc.)	(Real property car boat atc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income list each source of \$10,000 or more
(Describe)	(Describe)
Other	Other
(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	(Describe)
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	_
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property
3500 - \$1,000	
	City
\$1,001 - \$10,000	Guarantor
\$10 001 - \$190,000	
OVER \$100,000	Other
	(Describe)
Comments:	