

COVER PAGE

A Public Document

Please type or print in ink

Name (Last, First, Middle), Daytime Telephone Number, Mailing Address (Street, City, State, Zip Code), Optional: Fax / E-mail Address

1. Office, Agency, or Court

Name of Office, Agency, or Court:

SCSD

Division, Board, District, if applicable:

Your Position:

Director

If filing for multiple positions, list additional agency(ies)/ position(s):

Agency:

Position:

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

- State, County of, City of, Multi-County, Other

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

Assuming Office/Initial Date:

Annual: The period covered is January 1, 2006, through December 31, 2006.

-or-

The period covered is through December 31, 2006.

Leaving Office Date Left: (Check one)

The period covered is through the date of leaving office.

-or-

The period covered is through the date of leaving office.

Candidate

4. Schedule Summary

Total number of pages including this cover page:

Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 Yes - schedule attached Investments (Less than 10% Ownership)

Schedule A-2 Yes - schedule attached Investments (10% or greater Ownership)

Schedule B Yes - schedule attached Real Property

Schedule C Yes - schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D Yes - schedule attached Income - Gifts

Schedule E Yes - schedule attached Income - Travel Payments

-or-

No reportable interests on any schedule

5. Verification

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

Date Signed 2-22-07 (month, day, year)

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

SCHEDULE B
Interests in Real Property
(Including Rental Income)

STREET ADDRESS OR PRECISE LOCATION
LOT 6111, Block 12 Tract 601
CITY
SALTON CITY CA

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 / /06 DISPOSED / /06

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.

STREET ADDRESS OR PRECISE LOCATION
LOT 13, Block 11 Tract 601
CITY
SALTON CITY CA

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 / /06 DISPOSED / /06

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.

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

Comments: _____