## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Registration of Voters

A PUBLIC DOCUMENT

JU 29 2024

Please type or print in ink.	Imperial
NAME OF FILER (LAST) (FIRST)	(MIDDLE) COUNTY
Garcia Bethamee	Kyoko County
1. Office, Agency, or Court	
Agency Name (Do not use acronyms) Heber Elementary School Dis	stact Board Member
Division, Board, Department, District, if applicable	Your Position
Board	
▶ If filling for multiple positions, list below or on an attachment. (Do not	use acronyms)
A	Davillan
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
State	<ul> <li>Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)</li> </ul>
Multi-County	County of Imperial
City of	Other
3. Type of Statement (Check at least one box)	Leaving Office, Data Laft
Annual: The period covered is January 1, 2023, through December 31, 2023.	Leaving Office: Date Left/(Check one circle.)
The period covered is, throug December 31, 2023.	The period covered is January 1, 2023, through the date of leaving office.
Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.
Candidate: Date of Election 11 05 2024 and office sou	ght, if different than Part 1:
COLUMN MICHIGAN CONTRACTOR OF THE PARTY OF T	
Schedules attached	per of pages including this cover page:
_=.	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 B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
Scriedule B - Near Property - Scriedule attached	,
-or- J None - No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS STREET CITY	STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)	ca 92249
POBOX D 23 E. Main St. HO	L CHANGADDECC
(760) (004-2389	bethance garcia a gmal. Com
I have used all reasonable diligence in preparing this statement. I have re	eviewed this statement and to the best of my knowledge the information contained
herein and in any attached schedules is true and complete. I acknowled	
I certify under penalty of perjury under the laws of the State of Cali	rornia that the foregoing is true and correct.
Date Signed 07/26/2024	Signature
(thonth, day, year)	(File the originally signed paper statement with your filing official.)