

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT

Registrar of Voters  
Date Initial Filing Received  
J.A.  
MAY 30 2024  
Filing Official Use Only

Imperial County

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Molina Helen Diaz

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Heber Elementary School District

Division, Board, Department, District, if applicable

Your Position

Trustee

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Heber Public Utility District

Position: Director

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

State

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)

Multi-County

County of \_\_\_\_\_

City of Heber

Other \_\_\_\_\_

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

Annual: The period covered is January 1, 2023, through  
December 31, 2023.

Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one circle.)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
December 31, 2023.

The period covered is January 1, 2023, through the date  
of leaving office.

-or-

Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
the date of leaving office.

Candidate: Date of Election 11/5/24 and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary (required)

► Total number of pages including this cover page: 1

Schedules attached

Schedule A-1 - Investments - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

Schedule D - Income - Gifts - schedule attached

Schedule B - Real Property - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET  
(Business or Agency Address Recommended - Public Document)

PO Box 369

CITY  
Heber

STATE  
CA

ZIP CODE  
92249

DAYTIME TELEPHONE NUMBER  
760) 554-2380

EMAIL ADDRESS  
nenam760@yahoo.com

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

Date Signed 7/30/24  
(month, day, year)

Signature Helen Diaz Molina  
(File the originally signed paper statement with your filing official.)