CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

A PUBLIC DOCUMENT

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Please type or print in ink.	Imperial
NAME OF FILER (LAST) ANES Marganta	(MIDDLE) County
1. Office, Agency, or Court	
Agency Name (Do not use acronyms) CUSD BOOK OF Trustee Division, Board, Department, District, if applicable	Your Position
Sold Sold Sold Sold Sold Sold Sold Sold	
▶ If filing for multiple positions, list below or on an attachment. (Do not use	e acronyms)
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
State	Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County	X County of moeria
City of	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.)
The period covered is/, through December 31, 2023.	The period covered is January 1, 2023, through the date of leaving officeor-
	☐ The period covered is/, through the date of leaving office.
Candidate: Date of Election 11-05-24 and office sought,	if different than Part 1:
4. Schedule Summary (required) ► Total number	of pages including this cover page:
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 E - Income - Gifts - Travel Payments - schedule attached
Schedule B - Real Property – schedule attached	J Contradite L - Miconite - Chita - March 1 ayments - Schedule attached
-or- None - No reportable interests on any schedule	
5. Verification	
MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
1503 N. Imperial Ave Suite 10.	3 El Centro CA 97243
(160) 442-4114	maggie @ magallanes financial.com
I have used all reasonable diligence in preparing this statement. I have revie herein and in any attached schedules is true and complete. I acknowledge	wed this statement and to the best of my knowledge the information contained this is a public document.
I certify under penalty of perjury under the laws of the State of Californ	
Date Signed 07/15/24	ignature
(mont), day, year)	(Fix the originally signed paper statement with your filing official.)