

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Cot Voters Date Initial Filing Received

A PUBLIC DOCUMENT

Places true on print in inte	A PUBLIC DOCUMENT			Imperial
Please type or print in ink. AME OF FILER (LAST)	(FIRST)		MIDDLE)	County
Morales	(FIRST) Timothu	١	(MIDDLE) Adri	ane
Office, Agency, or Court)		
Agency Name (Do not use acronyms) Calipatia Uni Division, Board, Department, District, if appl	fied School Di	Strict Your Position	Board	N of trust
► If filing for multiple positions, list below o	or on an attachment. (Do not use a	acronyms)		-
Agency: Calipatria	unified	Position: Boo	ard of	trustee
Jurisdiction of Office (Check at le				
State		Judge, Retired Jud (Statewide Jurisdict		or Court Commissioner
Multi-County		County of		
City of <u>Calipatria</u>	·	Other		
Type of Statement (Check at least	one box)			
Annual: The period covered is Januar December 31, 2023.	•	Leaving Office:	Date Left	
The period covered is December 31, 2023.	/, through	☐ The period co of leaving offic -or-		2023, through the date
Assuming Office: Date assumed		☐ The period contact the date of lea		through
Candidate: Date of Election	and office sought, if	different than Part 1:		
Schedule Summary (required)	► Total number of	f pages including th	is cover page:	
Schedules attached				
Schedule A-1 - Investments - sched	dule attached	Schedule C - Income, Loa	ans, & Business Posi	tions - schedule attached
Schedule A-2 - Investments – sched		Schedule D - Income - G		
Schedule B - Real Property – sched	Jule attached S	Schedule E - Income G	ifts – Travel Payment	ts – schedule attached
or- 🖊 None - No reportable intere	sts on any schodulo			
Verification	sis on any sonedule			
MAILING ADDRESS STREET	CITY		STATE	ZIP CODE
(Business or Agency Address Recommended - Public D	ocument)	ta's	CIA	92233
DAYTIME TELEPHONE NUMBER		MAIL ADDRESS	CIT	-10035
(760) 562-9422	+	imothy, mon	ales Erak	wtmail.com
I have used all reasonable diligence in prepa herein and in any attached schedules is true	aring this statement. I have reviewed a and complete. I acknowledge this	d this statement and to the s is a public document.	e best of my knowled	
I certify under penalty of perjury under the	ne laws of the State of California	that the foregoing is tru	ie and correct.	
Date Signed 7/30/24	Sign	ature Dum	allos	Moule
(month, day, year)			ally signed paper statement w	ith your filing official.)