## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE



A PUBLIC DOCUMENT

Please type or print in ink.				Imperial.	
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)	COUMIE	
Mendoza	Marcela		G	County	
1. Office, Agency, or Court					
Agency Name (Do not use acronyms	)				
McCabe Union Elementary S	School District				
Division, Board, Department, District, i	f applicable	Your Position			
N/A		Trustee			
▶ If filing for multiple positions, list be	elow or on an attachment. (Do not of	use acronyms)		<del></del>	
Agency: N/A		Position: N//	Α		
2. Jurisdiction of Office (Check	k at least one box)				
State			<ul> <li>Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)</li> </ul>		
Multi-County		County of	mperial		
City of					
3. Type of Statement (Check at					
Annual: The period covered is January 1, 2023, through December 31, 2023.  The period covered is/, through December 31, 2023.  The period covered is/, through December 31, 2023.  Assuming Office: Date assumed					
-or- None - No reportable i	nterests on any schedule				
5. Verification	Alm/		CTATE	ZIP CODE	
MAILING ADDRESS STREET (Business or Agency Address Recommended -	CITY Public Document)		STATE	ZIP CODE	
2925 Sandalwood Ct.	El Ce	entro	CA	92243	
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS			
( 760 ) 554-1000  I have used all reasonable diligence in	n preparing this statement. I have re-	marcy.mendoza		vedge the information contained	
herein and in any attached schedules					
I certify under penalty of perjury un	nder the laws of the State of Calif	ornia that the foregoing	g is true and correct.		
Date Signed	2024 year	Signature (File	the driginally signed paper statem	ent with your filing official.)	