CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

AUG U 9 2024

A PUBLIC DOCUMENT

PΙε	ease type or print in ink.	Imperial
NA	ME OF FILER (LAST) (FIRST)	(MIDDLE) County
	Tabasez, Pompeyo	
1.	Office, Agency, or Court	
	Agency Name (Do not use acronyms) Heber Elementary school Pistrict	
	Division, Board, Department, District, if applicable	Your Position
	■ Board Trustee If filling for multiple positions, list below or on an attachment. (Do not use ac	: <u></u>
	Agency: 17eber Public Utility District	_ Position: Board Trustle
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 Imperial
	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/
	The period covered is/, through 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 1/5/24 and office sought, if different than Part 1:	
4.	. Schedule Summary (required) ► Total number of pages including this cover page:	
	Schedules attached	
	Odifedule A 1 myodinonia Schodalo dilachoa	chedule C - Income, Loans, & Business Positions - schedule attached
		chedule D - Income - Gifts - schedule attached
	Schedule B - Real Property – schedule attached	chedule E - Income – Gifts – Travel Payments – schedule attached
-or- X None - No reportable interests on any schedule		
5. Verification		
	MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
	57 G. Phensant St. Heber	CA: 92249
	DAYTIME TELEPHONE NUMBER EN	AAIL ADDRESS
	(760) 693-7646	
	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 8/9/24 Signa	ature 9 H
	(month, day, year)	(File the originally signed paper statement with your filing official.)