

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT**

AUG 13 2024

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) **Imperial County**

DELGADILLO KARLA

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
San Pasqual Valley Unified School Dist.
Division, Board, Department, District, if applicable Your Position
N/A Board member

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

Agency: _____ Position: _____

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

- State
- Multi-County _____
- City of _____
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of imperial
- 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.)
- Assuming Office:** Date assumed _____
- The period covered is January 1, 2023, through the date of leaving office.
- Candidate:** Date of Election 11/5/24 and office sought, if different than Part 1: _____
- The period covered is _____, through the date of leaving office.

4. Schedule Summary (required)

► Total number of pages including this cover page: _____

Schedules attached

- Schedule A-1 - Investments** – schedule attached
- Schedule A-2 - Investments** – schedule attached
- Schedule B - Real Property** – schedule attached
- Schedule C - Income, Loans, & Business Positions** – schedule attached
- Schedule D - Income – Gifts** – schedule attached
- Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1154 McDaniel Rd Winterhaven CA 92283

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(808) 269-9398 SDCA23@gmail.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 08/13/24
(month, day, year)

Signature [Signature]
(File the originally signed paper statement with your filing official.)