

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

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Washington Chuck

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)  
March Joint Powers Authority  
Division, Board, Department, District, if applicable Your Position  
Alternate

► 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  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of Riverside  
 City of \_\_\_\_\_  Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

**Annual:** The period covered is January 1, 2023, through December 31, 2023.  
-or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2023.  
 **Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  
 **Candidate:** Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_  
 **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one circle.)  
 The period covered is January 1, 2023, through the date of leaving office.  
-or-  
 The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

**4. Schedule Summary (required)**

► Total number of pages including this cover page: 15

**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 B - Real Property** – schedule attached  **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-  **None - No reportable interests on any schedule**

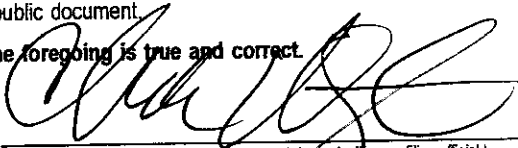
**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
4080 Lemon St 5th Floor Riverside CA 92501  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
(951 ) 955-1030 C.washington@rivco.org

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 03/29/2024  
(month, day, year)

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

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
Expanded Statement Attachment**

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name Chuck Washington

\* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAM #
County of Riverside	Riverside County Library Foundation	Board of Directors	Annual 1/1/2023 - 12/31/2023	011400060-NFH-0060
County of Riverside	Board of Supervisors	Supervisor	Annual 1/1/2023 - 12/31/2023	011400060-NFH-0060
County of Riverside	Riverside County Children and Families Commission	Member	Annual 1/1/2023 - 12/31/2023	011400060-NFH-0060
County of Riverside	Consolidated Countywide Oversight Board for the	Member	Annual 1/1/2023 - 12/31/2023	011400060-NFH-0060
County of Riverside	Riverside County Asset Leasing Corporation (CORAL)	Member	Annual 1/1/2023 - 12/31/2023	011400060-NFH-0060
March Joint Powers Authority	Riverside County	Alternate	Annual 1/1/2023 - 12/31/2023	
County of Riverside	Southwest Communities Financing Authority	Member	Annual 1/10/2023 - 12/31/2023	011400060-NFH-0060
CVAG		Member	Annual 1/1/2023 - 12/31/2023	
WRC-RCA		Director	Annual 1/1/2023 - 12/31/2023	
RCTC		Commissioner	Annual 1/1/2023 - 12/31/2023	
RTA		Director	Annual 1/1/2023 - 12/31/2023	
WRCOG		Director	Annual 1/1/2023 - 12/31/2023	

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
Expanded Statement Attachment**

<b>CALIFORNIA FORM 700</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name Chuck Washington

\* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #
County of Riverside	Southwest Communities Financing Authority	Alternate Member	Annual 1/1/2023 - 1/10/2023	011400060-NFH-0060
COUNTY OF RIVERSIDE	Temecula Valley Wine Country Enhanced Infrastructure Financing District Public Financing	Board Member	Annual 1/1/2023 - 12/31/2023	011400060-NFH-0060

# SCHEDULE A-1 Investments

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

<b>CALIFORNIA FORM 700</b> <small>FILING YEAR</small> Name <u>Washington, Chuck</u>
--

▶ NAME OF BUSINESS ENTITY  
Rancon Partners 628, LLC

GENERAL DESCRIPTION OF THIS BUSINESS  
Residential Development

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other Shares/Held in a IRA Account  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 23    01 / 20 / 23  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 23         /      / 23  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 23         /      / 23  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 23         /      / 23  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 23         /      / 23  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE  
 \$2,000 - \$10,000     \$10,001 - \$100,000  
 \$100,001 - \$1,000,000     Over \$1,000,000

NATURE OF INVESTMENT  
 Stock     Other \_\_\_\_\_  
(Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
     /      / 23         /      / 23  
 ACQUIRED                      DISPOSED

Comments: \_\_\_\_\_

# SCHEDULE A-2

## Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Washington, Chuck

**1 BUSINESS ENTITY OR TRUST**

Mittry & Washington Enterprises, LLC  
Name  
42225 Remington Ave. Unit A-2  
Temecula, CA 92590  
Address (Business Address Acceptable)

Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Screen Printing

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED        /        / 23 DISPOSED        /        / 23

NATURE OF INVESTMENT  
 Partnership  Sole Proprietorship  LLC  Other

YOUR BUSINESS POSITION Owner

**1 BUSINESS ENTITY OR TRUST**

Name  
Address (Business Address Acceptable)

Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED        /        / 23 DISPOSED        /        / 23

NATURE OF INVESTMENT  
 Partnership  Sole Proprietorship  Other

YOUR BUSINESS POSITION

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499  \$10,001 - \$100,000  
 \$500 - \$1,000  OVER \$100,000  
 \$1,001 - \$10,000

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499  \$10,001 - \$100,000  
 \$500 - \$1,000  OVER \$100,000  
 \$1,001 - \$10,000

**3 LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE**

None or  Names listed below  
Xtreme Fit  
Murrieta Valley Pony League  
KB Homes

**3 LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE**

None or  Names listed below

**4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT  REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED        /        / 23 DISPOSED        /        / 23

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership  
 Leasehold        Yrs remaining  Other       

Check box if additional schedules reporting investments or real property are attached

**4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT  REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED        /        / 23 DISPOSED        /        / 23

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership  
 Leasehold        Yrs remaining  Other       

Check box if additional schedules reporting investments or real property are attached

Comments:

Additional Single Sources of Income of \$10,000 or more for Mittry & Washington Enterprises, LLC

Barons Market  
Paragon Framing  
Viper Volleyball  
Temecula Valley USD  
Temecula Dance Company  
Big League Dreams  
Rancho California Water District  
Electric Brewing Co.  
Route 66 Cruisin' Reunion  
Murrieta Fire Department  
Eric Pigors  
Current Home  
Cafeteria Creative  
Murrieta Development  
Dorothy McElhinney MS  
Integrity Golf  
Lake Elsinore Little League  
Youngren Construction  
Scripps Emergency Dept  
West Coast Exotic Cars  
Advanced Painting & Wood Repair  
American Diesel  
Brujos Brewing Company  
Solaris Beer & Blending  
Suburban Armor  
Teen Challenge of SoCal  
Temecula Luiseno Elementary School  
The Goat & Vine  
The Mystic Museum  
Epic Advertising  
KB Home  
Temecula Valley Balloon & Wine

**CALIFORNIA FORM 700**  
 FAIR PRACTICES COMMISSION  
 Name  
 Washington, Chuck

**SCHEDULE B**  
**Interests in Real Property**  
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

42225 Remington Ave. Unit A-2

CITY

Temecula, CA 92590

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED      /      / 23      DISPOSED      /      / 23

NATURE OF INTEREST

Ownership/Deed of Trust       Easement  
 Leasehold       Other

Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

\$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

None  
 California T's

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

24909 Madison Ave. #221

CITY

Murrieta, CA 92562

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED      /      / 23      DISPOSED      /      / 23

NATURE OF INTEREST

Ownership/Deed of Trust       Easement  
 Leasehold       Held in IRA Account

Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

\$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

None  
 Chris Jansen

\* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_%       None

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_%       None

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

Guarantor, if applicable

Comments:

**SCHEDULE B**  
**Interests in Real Property**  
 (Including Rental Income)

Name  
Washington, Chuck

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
26463 Arboretum Way  
 CITY  
Murrieta, CA 92563

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 23 DISPOSED 23

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold  Held in IRA Account  
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None  
Mia McLaughlin

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
24909 Madison Ave #823  
 CITY  
Murrieta

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 23 DISPOSED 23

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold  Held in IRA account  
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

\* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ TERM (Months/Years) \_\_\_\_\_  
 \_\_\_\_\_%  None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ TERM (Months/Years) \_\_\_\_\_  
 \_\_\_\_\_%  None

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

Guarantor, if applicable

Comments: \_\_\_\_\_



**CALIFORNIA FORM 700**  
FAIR PRACTICES COMMISSION

Name  
Washington, Chuck

**SCHEDULE B**  
**Interests in Real Property**  
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
26438 Arboretum Way  
 CITY  
Murrieta, CA 92563

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 23 DISPOSED 02/08/23

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_  
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
1240 India St.  
 CITY  
San Diego

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED \_\_\_\_\_ DISPOSED 23

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_  
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None  
Jocelyn Aubert

\* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_  
 ADDRESS (Business Address Acceptable) \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_  
 INTEREST RATE \_\_\_\_\_ TERM (Months/Years) \_\_\_\_\_  
 \_\_\_\_\_%  None  
 HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_  
 ADDRESS (Business Address Acceptable) \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_  
 INTEREST RATE \_\_\_\_\_ TERM (Months/Years) \_\_\_\_\_  
 \_\_\_\_\_%  None  
 HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Washington, Chuck

▶ 1 INCOME RECEIVED		▶ 1 INCOME RECEIVED	
NAME OF SOURCE OF INCOME <u>SCEGA</u>		NAME OF SOURCE OF INCOME <u>California T's</u>	
ADDRESS (Business Address Acceptable) <u>27532 Commerce Center Dr. Temecula, CA 92590</u>		ADDRESS (Business Address Acceptable) <u>42225 Remington Ave. Unit A-2 Temecula, c 92590</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Gymnastics</u>		BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Screen Printing</u>	
YOUR BUSINESS POSITION <u>Office Manager</u>		YOUR BUSINESS POSITION <u>Bookkeeper/Member</u>	
GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only		GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input checked="" type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000	<input checked="" type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED		CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
<input type="checkbox"/> Salary	<input checked="" type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	<input type="checkbox"/> Salary	<input checked="" type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)		<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	
<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)		<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)	
<input type="checkbox"/> Loan repayment		<input type="checkbox"/> Loan repayment	
<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more		<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more	
_____ (Describe)		_____ (Describe)	
<input type="checkbox"/> Other _____ (Describe)		<input type="checkbox"/> Other _____ (Describe)	

▶ 2 LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____	INTEREST RATE _____ % <input type="checkbox"/> None	TERM (Months/Years) _____
ADDRESS (Business Address Acceptable) _____	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Real Property _____ Street address _____ City _____	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Other _____ (Describe)	
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000		

Comments: \_\_\_\_\_

**CALIFORNIA FORM 700**  
 Filing Information  
 Name: Washington, Chuck

**SCHEDULE D  
 Income - Gifts**

NAME OF SOURCE (Not an Acronym)	DATE (m/d/yy)	VALUE	DESCRIPTION OF GIFT(S)
CA State Association of Counties	01 / 13 / 23	\$ 921.67	Lodging
CA State Association of Counties	01 / 26 / 23	\$ 314.11	Lodging, meals
CA State Association of Counties	02 / 13 / 23	\$ 2,193.05	Registration, lodging, meals
County Government Advocacy	01 / 13 / 23	\$ 921.67	Lodging
County Government Advocacy	01 / 26 / 23	\$ 314.11	Lodging, meals
County Government Advocacy	02 / 13 / 23	\$ 2,193.05	Registration, lodging, meals
Visit Temecula Valley	12 / 19 / 23	\$ 150.00	Promotional backpack
Tourism Advocacy	12 / 19 / 23	\$ 150.00	Promotional backpack
Business Activity, if any, of source			
ADDRESS (Business Address Acceptable)			
28690 Mercedes St. Ste. 201			
Temecula, CA 92590			
NAME OF SOURCE (Not an Acronym)			
Burtec Waste Industries	04 / 07 / 23	\$ 300.00	Dinner x 2
Business Activity, if any, of source			
ADDRESS (Business Address Acceptable)			
1850 Aqua Mansa Rd			
Riverside, CA 92509			
NAME OF SOURCE (Not an Acronym)			
Voices for Children	09 / 28 / 23	\$ 500.00	Fundraising Event Ticket x 2
Business Activity, if any, of source			
ADDRESS (Business Address Acceptable)			
2851 Meadow Lark Lane			
San Diego, CA 92123			
NAME OF SOURCE (Not an Acronym)			
Court Appointed Special Advocates	09 / 28 / 23	\$ 500.00	Fundraising Event Ticket x 2
Business Activity, if any, of source			
ADDRESS (Business Address Acceptable)			
1100 K St. Ste. 101			
Sacramento, CA 95814			
NAME OF SOURCE (Not an Acronym)			
CA State Association of Counties	02 / 03 / 23	\$ 1,294.00	Lodging, meals
Business Activity, if any, of source			
ADDRESS (Business Address Acceptable)			
1100 K St. Ste. 101			
Sacramento, CA 95814			
NAME OF SOURCE (Not an Acronym)			
County Government Advocacy	02 / 03 / 23	\$ 1,294.00	Lodging, meals
Business Activity, if any, of source			
ADDRESS (Business Address Acceptable)			
1100 K St. Ste. 101			
Sacramento, CA 95814			
NAME OF SOURCE (Not an Acronym)			
Waste			
Business Activity, if any, of source			
ADDRESS (Business Address Acceptable)			
1850 Aqua Mansa Rd			
Riverside, CA 92509			
NAME OF SOURCE (Not an Acronym)			

Additional Schedule D Gifts from CA State Association of Counties

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03/02/2023	\$293.49	Lodging, meals
03/23/2023	\$454.52	Lodging, meals
04/13/2023	\$721.11	Lodging
07/24/2023	\$2,511.91	Lodging, meals
08/10/2023	\$495.51	Lodging, meals
08/31/2023	\$465.88	Lodging, meals
10/06/2023	\$1,332.49	Lodging, meals
12/01/2023	\$1,427.43	Lodging, meals

## SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

**CALIFORNIA FORM 700**

FAIR POLITICAL AND PUBLIC COMMUNICATIONS

Name  
Washington, Chuck

- Mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE (Not an Acronym)  
CA State Association of Counties  
ADDRESS (Business Address Acceptable)  
1100 K St. Ste. 101  
CITY AND STATE  
Sacramento, CA 95814  
 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_ AMT: \$ 1,041.59  
(If gift)

▶ MUST CHECK ONE:       Gift -or-  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description Travel reimbursement

▶ If Gift, Provide Travel Destination \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
CA State Association of Counties  
ADDRESS (Business Address Acceptable)  
1100 K St. Ste. 101  
CITY AND STATE  
Sacramento, CA 95814  
 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_ AMT: \$ 521.82  
(If gift)

▶ MUST CHECK ONE:       Gift -or-  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description Travel reimbursement

▶ If Gift, Provide Travel Destination \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
CA State Association of Counties  
ADDRESS (Business Address Acceptable)  
1100 K St. Ste. 101  
CITY AND STATE  
Sacramento, CA 95814  
 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_ AMT: \$ 962.27  
(If gift)

▶ MUST CHECK ONE:       Gift -or-  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description Travel Reimbursement

▶ If Gift, Provide Travel Destination \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
CA State Association of Counties  
ADDRESS (Business Address Acceptable)  
1100 K St. Ste. 101  
CITY AND STATE  
Sacramento, CA 95814  
 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_ AMT: \$ 349.64  
(If gift)

▶ MUST CHECK ONE:       Gift -or-  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description Travel reimbursement

▶ If Gift, Provide Travel Destination \_\_\_\_\_

Comments: \_\_\_\_\_

## SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

<b>CALIFORNIA FORM 700</b>
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <u>Washington, Chuck</u>

- Mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

<p>▶ NAME OF SOURCE (Not an Acronym) <u>CA State Association of Counties</u> ADDRESS (Business Address Acceptable) <u>1100 K St. Ste 101</u> CITY AND STATE <u>Sacramento, CA 95814</u> <input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p>DATE(S): ___/___/___ - ___/___/___ AMT: \$ <u>327.91</u> <small>(If gift)</small></p> <p>▶ MUST CHECK ONE:      <input type="checkbox"/> Gift -or- <input checked="" type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description <u>Travel reimbursement</u></p> <p>▶ If Gift, Provide Travel Destination _____</p>	<p>▶ NAME OF SOURCE (Not an Acronym) <u>CA State Association of Counties</u> ADDRESS (Business Address Acceptable) <u>1100 K St. Ste 101</u> CITY AND STATE <u>Sacramento, CA 95814</u> <input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p>DATE(S): ___/___/___ - ___/___/___ AMT: \$ <u>442.30</u> <small>(If gift)</small></p> <p>▶ MUST CHECK ONE:      <input type="checkbox"/> Gift -or- <input checked="" type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description <u>Travel reimbursement</u></p> <p>▶ If Gift, Provide Travel Destination _____</p>
<p>▶ NAME OF SOURCE (Not an Acronym) <u>CA State Association of Counties</u> ADDRESS (Business Address Acceptable) <u>1100 K St. Ste. 101</u> CITY AND STATE <u>Sacramento, CA 95814</u> <input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p>DATE(S): ___/___/___ - ___/___/___ AMT: \$ <u>337.96</u> <small>(If gift)</small></p> <p>▶ MUST CHECK ONE:      <input type="checkbox"/> Gift -or- <input checked="" type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description <u>Travel reimbursement</u></p> <p>▶ If Gift, Provide Travel Destination _____</p>	<p>▶ NAME OF SOURCE (Not an Acronym) <u>CA State Association of Counties</u> ADDRESS (Business Address Acceptable) <u>1100 K St. Ste.101</u> CITY AND STATE <u>Sacramento, CA 95814</u> <input type="checkbox"/> 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p>DATE(S): ___/___/___ - ___/___/___ AMT: \$ <u>337.96</u> <small>(If gift)</small></p> <p>▶ MUST CHECK ONE:      <input type="checkbox"/> Gift -or- <input checked="" type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description <u>Travel reimbursement</u></p> <p>▶ If Gift, Provide Travel Destination _____</p>
<p>Comments: _____</p>	

# SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

<b>CALIFORNIA FORM 700</b> <small>FAIR PLAY FOR CUBAN LIBERTY COMMISSION</small> Name Washington, Chuck
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- Mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE (Not an Acronym)  
CA State Association of Counties  
 ADDRESS (Business Address Acceptable)  
1100 K St. Ste. 101  
 CITY AND STATE  
Sacramento, CA 95814  
 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_ AMT: \$ 375.95  
(if gift)

▶ MUST CHECK ONE:       Gift -or-  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description Travel reimbursement

▶ If Gift, Provide Travel Destination \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
CA State Association of Counties  
 ADDRESS (Business Address Acceptable)  
1100 K St. Ste. 101  
 CITY AND STATE  
Sacramento, CA 95814  
 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_ AMT: \$ 645.23  
(if gift)

▶ MUST CHECK ONE:       Gift -or-  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description Travel reimbursement

▶ If Gift, Provide Travel Destination \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
 ADDRESS (Business Address Acceptable)  
 CITY AND STATE  
 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_ AMT: \$ \_\_\_\_\_  
(if gift)

▶ MUST CHECK ONE:       Gift -or-  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
 ADDRESS (Business Address Acceptable)  
 CITY AND STATE  
 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_ AMT: \$ \_\_\_\_\_  
(if gift)

▶ MUST CHECK ONE:       Gift -or-  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination \_\_\_\_\_

Comments: \_\_\_\_\_