STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A PUBLIC DOCUMENT

NAME OF FILER  (LAST)   (FIRST)   (MIDDLE)
Fish            Susan          O

1. Office, Agency, or Court

Agency Name  (Do not use acronyms)
West Valley-Mission Community College District Board of Trustees
Division, Board, Department, District, if applicable  Your Position

► 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 or Court Commissioner (Statewide Jurisdiction)
☐ County of Santa Clara
☐ Other __________________________________________

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

☒ Annual:  The period covered is January 1, 2018, through December 31, 2018.
- or -
The period covered is ______/_____/_______ through December 31, 2018.

☐ Leaving Office: Date Left ______/_____/_______
(Check one circle.)

☐ The period covered is January 1, 2018, through the date of leaving office.

☐ The period covered is ______/_____/_______ through the date of leaving office.

☐ Assuming Office: Date assumed ______/_____/_______

☐ Candidate: Date of Election ___________ and office sought, if different than Part 1:

4. Schedule Summary (must complete)  ► 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
16070 Greenridge Terrace  Los Gatos  CA  95032

DAYTIME TELEPHONE NUMBER  EMAIL ADDRESS
( 408 ) 821-5366  sfish@smlaw.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 03/08/2019  Signature __________________________
(month, day, year)  (File the originally signed paper statement with your filing official.)

FFPC Form 700 (2018/2016)
FFPC Advice Email: advice@ffpc.ca.gov
FFPC Toll-Free Helpline: 866/276-3772  www.ffpc.ca.gov
**STATEMENT OF ECONOMIC INTERESTS**

**COVER PAGE**

A PUBLIC DOCUMENT

**NAME OF FILER**

<table>
<thead>
<tr>
<th>LAST</th>
<th>FIRST</th>
<th>MIDDLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grey</td>
<td>Adrienne</td>
<td>Craig</td>
</tr>
</tbody>
</table>

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

- **Agency Name** (Do not use acronyms):
  West Valley-Mission Community College District

- **Governing Board**
  - Trustee

- 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
- [ ] County of Santa Clara
- [ ] Other

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

- [ ] Or:
  - The period covered is _______/_______/_______, through December 31, 2018.

- [ ] 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, 2018, through the date of leaving office.
  - [ ] The period covered is _______/_______/_______ through the date of leaving office.

- [ ] Schedule A-1 - Investments - schedule attached
- [ ] Schedule A-2 - Investments - schedule attached
- [ ] Schedule B - Real Property - schedule attached

- [X] None - No reportable interests on any schedule

4. **Schedule Summary (must complete)**

   - Total number of pages including this cover page: ______

   **Schedules attached**

   - [ ] Schedule C - Income, Loans, & Business Positions - schedule attached
   - [ ] Schedule D - Income - Gifts - schedule attached
   - [ ] Schedule E - Income - Gifts - Travel Payments - schedule attached
   - [ ] Schedule F - Expenses - schedule attached

5. **Verification**

   - **MAILING ADDRESS**
     - 14000 Fruitvale Avenue, Saratoga, CA 95070
   - **CITY**
   - **STATE**
   - **ZIP CODE**

   - **DAYTIME TELEPHONE NUMBER**
     - (408) 741-2011
   - **EMAIL ADDRESS**

   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** 4/2/2019

   **Signature**

   (Fax the originally signed paper statement with your filing officer.)
# California Form 700

## Statement of Economic Interests

### Cover Page

**NAME OF FILER**

<table>
<thead>
<tr>
<th>(LAST)</th>
<th>(FIRST)</th>
<th>(MIDDLE)</th>
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</thead>
<tbody>
<tr>
<td>Kepner</td>
<td>Anne</td>
<td>Jones</td>
</tr>
</tbody>
</table>

### 1. Office, Agency, or Court

<table>
<thead>
<tr>
<th>Agency Name (Do not use acronyms)</th>
<th>Your Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>West Valley Mission Community College District</td>
<td>Trustee, Area 3</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Agency:</th>
<th>Position:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

- [ ] State
- [ ] Multi-County
- [ ] City of ____________
- [ ] Judge or Court Commissioner (Statewide Jurisdiction)
- [ ] County of ____________
- [ ] Other ____________

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

- [ ] Annual: The period covered is January 1, 2018, through December 31, 2018.
- [ ] The period covered is ____________, through December 31, 2018.
- [ ] Assuming Office: Date assumed ____________ and office sought, if different than Part 1:
- [ ] Leaving Office: Date Left ____________ (Check one circle.)
  - [ ] The period covered is January 1, 2018, through the date of leaving office.
  - [ ] The period covered is ____________, through the date of leaving office.
- [ ] Candidate: Date of Election ____________

### 4. Schedule Summary (must complete)

| Total number of pages including this cover page: | 7 |

- [ ] 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

- [ ] None - No reportable interests on any schedule

### 5. Verification

MAILING ADDRESS

2128 Forbes Avenue
Santa Clara, CA 95050

DAYTIME TELEPHONE NUMBER

(408) 205-8681

EMAIL ADDRESS

annekepner@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: 03/27/2019

Signature

(Place the originally signed paper statement with your filing official)
STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Please type or print in ink.

NAME OF FILER
(LAST)
KINMAN

(MID) RAND

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
West Valley Mission Community College District
Division, Board, Department, District, if applicable
Your Position
Board Member

☐ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: Mission-West Valley Land Corporation
Position: Board Member

2. Jurisdiction of Office (Check at least one box)
☐ State
Santa Clara, Santa Cruz
☐ Multi-County
☐ City of
☐ County of
☐ Other

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2018, through December 31, 2018.
☐ Leaving Office: Date Left: __________/__________
☐ The period covered is __________/__________, through December 31, 2018.
☐ The period covered is __________/__________, through the date of leaving office.
☐ Assuming Office: Date assumed __________/__________
☐ Candidate: Date of Election __________/__________ and office sought, if different than Part 1:

4. Schedule Summary (must complete)

☐ Total number of pages including this cover page: 7

Schedules attached
☐ Schedule A-1 - Investments - schedule attached
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☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached
☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
901 Richmond Ave
San Jose CA 95128

STREET
STREET

CITY
San Jose

STATE
CA

ZIP CODE
95128

DAYTIME TELEPHONE NUMBER
(408) 635-2661

EMAIL ADDRESS
randikinman@yahoo.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
03/25/2019

(month, day, year)

Signature

(Filing the originally signed paper statement with your filing officials)

FPPC Form 700 (2018/2019)
FPPC Advice Email: advice@fppc.ca.gov
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STATEMENT OF ECONOMIC INTERESTS

AMENDMENT

COVER PAGE

NAME OF FILER
Lucas, Jack Ellis

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
West Valley - Mission Community College District
Division, Board, Department, District, if applicable
Board of Trustees - Trustee
Your Position

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 Santa Clara & Santa Cruz

☐ City of __________________________

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ County of __________________________

☐ Other __________________________

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

☒ Annual: The period covered is January 1, 2018, through December 31, 2018.

☐ Leaving Office: Date Left __________

☐ The period covered is __________/________/________, through December 31, 2018.

☐ Assuming Office: Date assumed __________/________/________

☐ The period covered is __________/________/________ through the date of leaving office.

☐ Candidate: Date of Election __________ and office sought, if different than Part 1:

☒ None - No reportable interests on any schedule

4. Schedule Summary (must complete)

☐ 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
14000 Fruitvale Ave, Saratoga, CA 95070

STREET

CITY

STATE

ZIP CODE

DAYTIME TELEPHONE NUMBER
408-741-2011

E-MAIL ADDRESS
lfLucas@msn.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 03/18/19

Signature

(Date the originally signed paper statement with your filing officer.)
## 1. Office, Agency, or Court

**Agency Name** (Do not use acronyms)

WEST VALLEY MISSION COMMUNITY COLLEGE DISTRICT

Division, Board, Department, District, if applicable
GOVERNING BOARD

Your Position
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
- [x] Multi-County
  - SANTA CLARA, SANTA CRUZ
- [ ] City of ____________________________
- [ ] County of ____________________________
- [ ] Other ____________________________

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

- [x] Annual: The period covered is January 1, 2018, through December 31, 2018.
- [ ] -or-
- [ ] The period covered is __________ through December 31, 2018.

- [ ] Leaving Office: Date Left __________
- [ ] -or-
- [ ] The period covered is January 1, 2018, through the date of leaving office.
- [ ] -or-
- [ ] The period covered is __________ through the date of leaving office.

- [ ] Assuming Office: Date assumed __________

- [ ] Candidate: Date of Election __________ and office sought, if different than Part 1:

## 4. Schedule Summary (must complete)  ▶ Total number of pages including this cover page: 2

**Schedules attached**

- [x] 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
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- [ ] Schedule E - Income - Gifts - Travel Payments – schedule attached

- [ ] -or- [ ] None - No reportable interests on any schedule

## 5. Verification

**MAILING ADDRESS**  2968 ASHEN DRIVE  SANTA CLARA  CA  95051

**STREET**  __________________________________________________________

**CITY**  SANTA CLARA  **STATE**  CA  **ZIP CODE**  95051

**DAYTIME TELEPHONE NUMBER**  (408) 243-7145

**EMAIL ADDRESS**  rtowenssr@msn.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**  MARCH 9, 2019  **Signature**  ____________________________________________
STATEMENT OF ECONOMIC INTERESTS
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Watanabe Karl Junji

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   West Valley Mission College
   Division, Board, Department, District, if applicable
   Board
   Your Position
   Trustee
   ▶ 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 Santa Clara & Santa Cruz counties
   □ County of ___________________________
   □ City of ___________________________
   □ Judge or Court Commissioner (Statewide Jurisdiction)
   □ Other ___________________________

3. Type of Statement (Check at least one box)
   □ Annual: The period covered is January 1, 2018, through December 31, 2018.
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   □ The period covered is / / / , through December 31, 2018.
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      (Check one circle.)
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   - or -
   □ The period covered is / / / , through the date of leaving office.
   □ Assuming Office: Date assumed / / /
   □ Candidate: Date of Election ___________________________ and office sought, if different than Part 1: ___________________________

4. Schedule Summary (must complete)
   ▶ Total number of pages including this cover page: __________
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   □ 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)
   4215 Tobin Circle Santa Clara CA 95054
   DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
   ( 408 ) 691-4445 karliw2000@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 in and 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 4/2/2019 Signature ___________________________
   (Print the original signed paper statement with your title or agency)

FPPC Form 700 (2/18/2019)
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
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