CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT	COVER PAGE	RECEIVED
Please type or print in ink.		
NAME OF FILER (LAST) ROUNDING	(FIRST) Maya	CITYCLEDICO
1. Office, Agency, or Court	J	CITY OF PERRIS
Agency Name (Do not use acronyms)		VIII OF PERRIS
CHY of Perris		- Size & shared
Division, Board, Department, District, if applicable	Your Position	erk
▶ If filing for multiple positions, list below or on an a	attachment. (Do not use acronyms)	
Agency:	Position:	
2. Jurisdiction of Office (Check at least one	box)	
State		Commissioner (Statewide Jurisdiction)
Multi-County		70
Way or Perry S	_ , , , , , , , , , , , , , , , , , , ,	
3. Type of Statement (Check at least one box)		
·		
Annual: The period covered is January 1, 2017 December 31, 2017.	(Check one)	: Date Left/
The period covered is//_ December 31, 2017,	, through O The period of leaving office	covered is January 1, 2017, through the date of e.
Assuming Office: Date assumed/		covered is/ through eaving office.
Candidate: Date of Election 11/6/18	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 attack	hed Schedule C - Income, L	oans & Business Positions – schedule attached
Schedule A-2 - Investments - schedule attack	hed Schedule D - Income -	Gifts - schedule attached
Schedule B - Real Property - schedule attact	hed Schedule E - Income -	Gifts - Travel Payments - schedule attached
None - No reportable interests on any	schedule	
5. Verification		
MAILING ADDRESS STREET	CITY	STATE ZIP CODE
DATTINE TELEPHONE NUMBER	E-MAIL ADDRESS	v
I have used all reasonable diligence in preparing this s herein and in any attached schedules is true and com-	statement. I have reviewed this statement and to to	he best of my knowledge the information contained
I certify under penalty of perjury under the laws o		the end comed
Date Signed MM	7/29 Signature _	
(pon(b day year)		cial.)