

RECEIVED COVER PAGE

AUG 07 2020

TULARE COUNTY
REGISTRAR OF VOTERS

AUG 07 2020 PM 4:02

Please type or print in ink.

NAME OF FILER (LAST) **Valdovinos** (FIRST) **Daniel** (MIDDLE) **Diaz,jr**

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City Of Farmersville

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 **Tulare**
- Other _____

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

- Annual:** The period covered is January 1, 2017, through December 31, 2017.
- Leaving Office:** Date Left _____ / _____ / _____
(Check one)
- Assuming Office:** Date assumed _____ / _____ / _____
- The period covered is January 1, 2017, through the date of leaving office.
- The period covered is _____ / _____ / _____, through the date of leaving office.
- Candidate:** Date of Election **11/03/2020** and office sought, if different than Part 1: _____

1. 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

1. Verification

CITY STATE ZIP CODE

Farmersville, CA 93223

DAY TIME TELEPHONE

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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: 8-7-20
(Month, Day, Year)

Signature: Daniel Valdovinos
(File the originally signed statement with your filing official)