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CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received

TOWN OF LOOMIS

lease type or print in ink.		
NAME OF FILER (LAST) (FIRST) (MIDDLE)		
	Cortez Uman	ida lee
1. Office, Agency, or Court		
	Agency Name (Do not use acronyms)	A
	Town of Loomis	Town Council
	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	 Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
	Multi-County	County of
	Folly of LOOMIS	Other
3. Type of Statement (Check at least one box)		
)	Annual: The period covered is January 1, 2021, through December 31, 2021.	Leaving Office: Date Left/(Check one circle.)
	The period covered is/, through December 31, 2021.	☐ The period covered is January 1, 2021, through the date of leaving office.
	Assuming Office: Date assumed	The period covered is, through the date of leaving office.
	Candidate: Date of Election 11 8 22 and office sought, if	
т.	. Schedule Summary (must complete) ► Total number of pages including this cover page: Schedules attached	
	Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – 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		
_	Verification	
	MAILING ADDRESS STREET CITY	STATE ZIP CODE
	(Business or Agency Address Recommended - Public Document)	Luomis CA 95650
		ATT ADDRESS
	(914) 595-3937	Cortezfor Loomis Egmail-Lom
)	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 Signed Signed Sign	(File the original ysigned paper statement with your ming officials)