

A PUBLIC DOCUMENT

Date Initial Filing Received
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Filed Date: 02/04/2025 04:55 PM SAN: 072400521-STH-0521

Please type or print in ink.

NAME OF FILER (LAST	r) (FIRST)		(MIDDLE)		
De Jesus	David		D		
1. Office, Agen	cy, or Court				
Agency Name (L	Do not use acronyms)				
	s Municipal Water District				
	Department, District, if applicable		Your Position		
			Director		
. If filling for many	Hinto positions list balour or on an attachment		Director		
▶ 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		
			V Other District		
			Otter District		
3. Type of Sta	tement (Check at least one box)				
	e period covered is January 1, 2024 , through ecember 31, 202 4.		Leaving Office: Date Left/(Check one circle below.)		
	e period covered is/	, through	The period covered is January 1, 2024, through the date of leaving officeor-		
Assuming C	Office: Date assumed		The period covered is/, through the date of leaving office.		
Candidate:	Date of Election and	office sought, i	if different than Part 1:		
4. Schedule Si	ummary (required) ► Tota	al number o	of pages including this cover page: 3		
Schedules	• • • •		prigor moraling and cover pager		
_			Schodula C. Incomo Loono & Business Positions, cohedula attached		
=	• A-1 - Investments – schedule attached	×	Schedule C - Income, Loans, & Business Positions – schedule attached Schedule D - Income – Gifts – schedule attached		
	• A-2 - Investments – schedule attached		Schedule E - Income – Gifts – Travel Payments – schedule attached		
Scriedule	B - Real Property - schedule attached		Constant E moome one mayor aymone constant attached		
-or- □ None	No reportable interests on any sobo	ndulo			
	 No reportable interests on any sche 	uule			
5. Verification					
MAILING ADDRESS (Business or Agency)	STREET Address Recommended - Public Document)	CITY	STATE ZIP CODE		
1021 East M	liramar Avenue	Clarem	ont CA 91711		
DAYTIME TELEPHON	NE NUMBER		EMAIL ADDRESS		
(909) 621	-5568	1	ddejesus@tvmwd.com		
	easonable diligence in preparing this statement. y attached schedules is true and complete.		ved this statement and to the best of my knowledge the information contained his is a public document.		
I certify under p	penalty of perjury under the laws of the Sta	te of Californi	ia that the foregoing is true and correct.		
Date Signed	02/04/2025 04:55 PM	Sir	gnature David D De Jesus		
	(month, day, year)	Jig	(File the originally signed paper statement with your filing official.)		



STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
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A PUBLIC DOCUMENT

Filed Date: 03/05/2025 10:48 AM SAN: 072400521-STH-0521

Ple	ease type or print in ink.			5/ ii ii 5/2/15552/ 5/// 502/	
NAI	ME OF FILER (LAST)	(FIRST)		(MIDDLE)	
G	oytia	Carlos			
1.	Office, Agency, or Court				
	Agency Name (Do not use acronyms)				
	Three Valleys Municipal Water Distri	ct			
	Division, Board, Department, District, if applicable		Your Position		
			Director		
	► If filing for multiple positions, list below or on	an attachment (Do not u	_		
		an attachment. (Do not a	se acronyms)		
	Agency: SEE ATTACHED LIST		Position:		
_	luniadiation of Office (or)				
۷.	Jurisdiction of Office (Check at least	one box)			
	State		Judge, Retire (Statewide Ju	d Judge, Pro Tem Judge, or Court Commissioner risdiction)	
	Multi-County		County of		
	City of		➤ Other Dist		
_					
ა .	Type of Statement (Check at least one	•			
	Annual: The period covered is January 1, December 31, 2024.	202 4, through	Leaving Off	fice: Date Left/(Check one circle below.)	
	The period covered is/ December 31, 202 4.	/, through	☐ The perion leaving of the perion of the p	od covered is January 1, 202 4, through the date of flice.	
	Assuming Office: Date assumed/_			od covered is/, through of leaving office.	
	Candidate: Date of Election	and office sough	t, if different than Part 1	:	
4	Schedule Summary (required)	► Total numbo	r of pages includir	an this cover page:	
4. Schedule Summary (required) ► Total number of pages including this cover page:2					
	Schodulo A 1 Investments schodule	attached [□ Schedule C - Incom	e, Loans, & Business Positions – schedule attached	
	Schedule A-1 - Investments – schedule Schedule A-2 - Investments – schedule	_		e – Gifts – schedule attached	
	Schedule B - Real Property – schedule	_		e – Gifts – Travel Payments – schedule attached	
				•	
-(or- 🗷 None - No reportable interests	on any schedule			
_	Verification				
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document	CITY		STATE ZIP CODE	
	1021 East Miramar Avenue	Clare	mont	CA 91711	
	DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
	(909) 621-5568		cgoytia@tvmwd	.com	
	I have used all reasonable diligence in preparing herein and in any attached schedules is true and			If to the best of my knowledge the information contained ent.	
	I certify under penalty of perjury under the la	ws of the State of Califo	rnia that the foregoing	is true and correct.	
	Date Signed 03/05/2025 10:48 A	M	Signatura	Carlos Goytia	
	Date Signed 03/05/2025 10:48 A (month, day, year)	<u> </u>	Signature	the originally signed paper statement with your filing official.)	



Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
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A PUBLIC DOCUMENT

Filed Date: 03/26/2025 09:33 AM SAN: 072400521-STH-0521

NAME OF FILER (LAS	T) (FIRST)		(MIDDLE)
Hanlon	Jeff		
1. Office, Agen	cy, or Court		
Agency Name (Do not use acronyms)		
	vs Municipal Water District		
	Department, District, if applicable		Your Position
,,	- openions, - control, it oppnions.		
			Director
▶ If filing for mu	ultiple positions, list below or on an attachmen	ıt. (Do not us	se acronyms)
A gapay:			Position:
Agency.			FOSILIOII
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
			V Other District
			Other District
3. Type of Sta	tement (Check at least one box)		
× Annual: Th	ne period covered is January 1, 202 4, through	١	Leaving Office: Date Left/
	ecember 31, 202 4.		(Check one circle below.)
	ne period covered is//ecember 31, 202 4.	, through	 The period covered is January 1, 2024, through the date of leaving office. -or-
Assuming (Office: Date assumed//		The period covered is/, through the date of leaving office.
Candidate:	Date of Election and	I office sought	nt, if different than Part 1:
4. Schedule S	ummary (required) ► To	tal number	er of pages including this cover page:
Schedules	• • •	tai mamboi	To pages moraling this cover page.
Ochedules	attached		
Schedule	e A-1 - Investments - schedule attached	2	Schedule C - Income, Loans, & Business Positions – schedule attached
	e A-2 - Investments - schedule attached		Schedule D - Income – Gifts – schedule attached
× Schedule	e B - Real Property – schedule attached		Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- ☐ None	 No reportable interests on any sch 	edule	
5. Verification			
MAILING ADDRESS	STREET Address Recommended - Public Document)	CITY	STATE ZIP CODE
,	Address Recommended - Fublic Bocumenty Airamar Avenue	Clarer	emont CA 91711
DAYTIME TELEPHO		Oldici	EMAIL ADDRESS
(909) 621	-5568		jhanlon@tvmwd.com
<u> </u>		t. I have revio	iewed this statement and to the best of my knowledge the information contained
	y attached schedules is true and complete.		
I certify under p	penalty of perjury under the laws of the St	ate of Califor	ornia that the foregoing is true and correct.
Date Signed	03/26/2025 09:33 AM	,	Signature Jeff Hanlon
_	(month, day, year)		(File the originally signed paper statement with your filing official.)



Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Date Initial Filing Received
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A PUBLIC DOCUMENT

Filed Date: 03/12/2025 08:46 AM SAN: 072400521-STH-0521

NAME OF FILER (LAS	ST) (FIRST)		(MIDDLE)
Kuhn	Robert		G
1. Office, Ager	ncy, or Court		
Agency Name ((Do not use acronyms)		
	ys Municipal Water District		
	Department, District, if applicable		Your Position
			Director
► If filing for m	ultiple positions, list below or on an attachmer	nt (Do not us	
ŭ		it. (Do not ac	ou delonymoj
Agency: SEE	ATTACHED LIST		Position:
2. Jurisdiction	n of Office (Check at least one box)		
	Ter emes (emesical successions 2027)		Udgo Betired Judgo Bro Tem Judgo or Court Commissioner
State			Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County			County of
			➤ Other District
	atement (Check at least one box)		
	he period covered is January 1, 2024, through	,	Leaving Office: Date Left/
D	lecember 31, 202 4.	ı	(Check one circle below.)
	he period covered is///	, through	 The period covered is January 1, 2024, through the date of leaving office. -or-
Assuming	Office: Date assumed//		The period covered is/, through the date of leaving office.
Candidate:	Date of Election and	office sough	it, if different than Part 1:
4. Schedule S	Summary (required) ► To	tal number	r of pages including this cover page:
Schedules	- · · · · · · · · · · · · · · · · · · ·		, c
▼ Schedul	le A-1 - Investments – schedule attached	Г	Schedule C - Income, Loans, & Business Positions – schedule attached
	le A-2 - Investments – schedule attached		Schedule D - Income - Gifts - schedule attached
=	le B - Real Property – schedule attached	Γ	Schedule E - Income – Gifts – Travel Payments – schedule attached
	, ,	_	_
-or- □ None	• No reportable interests on any sch	edule	
5. Verification			
MAILING ADDRESS	S STREET y Address Recommended - Public Document)	CITY	STATE ZIP CODE
,	Miramar Avenue	Clare	mont CA 91711
DAYTIME TELEPHO	ONE NUMBER		EMAIL ADDRESS
(909)621	1-5568		bkuhn@tvmwd.com
	reasonable diligence in preparing this statement attached schedules is true and complete.		iewed this statement and to the best of my knowledge the information contained be this is a public document.
I certify under	penalty of perjury under the laws of the St	ate of Califor	rnia that the foregoing is true and correct.
D 4 S	02/42/2025 02:40 454	_	Pokart C Kuba
Date Signed _	03/12/2025 08:46 AM (month, day, year)	,	Signature Robert G Kuhn (File the originally signed paper statement with your filing official.)



ECONOMIC INTERESTS

Date Initial Filing Received
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OFFICIAL PAGE

A PUBLIC DOCUMENT

Filed Date: 12/31/2024 08:34 PM SAN: 072400521-STH-0521

Please type or print in ink.			3,114. 07		
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)		
Marquez	Jorge				
1. Office, Agency, or Court					
Agency Name (Do not use acronyms)					
Three Valleys Municipal Water D	District				
Division, Board, Department, District, if app		Your Position	<u> </u>		
		Director			
► If filing for multiple positions, list below o	or on an attachment (Do no				
י יייייי איייייייייייייייייייייייייייי	attaoriiionti. (DO 110	. 200 autonymoj			
Agency:		Position:			
2. Jurisdiction of Office (Check at I	east one hov)				
_	oust one box)		rod ludge Dr. T	on Count Course 1 1	
State] Judge, Reti (Statewide √	red Judge, Pro Tem Judge Jurisdiction)	e, or court commissioner	
Multi-County		County of			
City of		➤ Other Dis			
3. Type of Statement (Check at least			_	_	
	•		Office: Data Latt	1	
Annual: The period covered is Janua December 31, 2023.	แง เ, ∠∪∠ง, แแบนgn	∟ Leaving C	Office: Date Left/_ (Check one circ		
-or-	_/, throug	nh	eriod covered is January 1,	•	
December 31, 2023.	, throug		ring office.	, , , , , , , , , , , , , , , , , , , ,	
★ Assuming Office: Date assumed	2 , 06 , 2024		eriod covered is/ te of leaving office.	/, through	
			·		
Candidate: Date of Election	and office sou	ugnτ, π αιπerent than Part	· ii		
• • • • •	chedule Summary (required) ► Total number of pages including this cover page:				
Schedules attached					
Schedule A-1 - Investments – sche	edule attached			ositions - schedule attached	
Schedule A-2 - Investments – sche	edule attached	Schedule D - Inco	me - Gifts - schedule atta	ched	
Schedule B - Real Property - sche	edule attached	Schedule E - Inco	me – Gifts – Travel Payme	ents - schedule attached	
-or- ☐ None - No reportable interes	ests on any schedule				
5. Verification					
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public I	CITY Document)		STATE	ZIP CODE	
1021 East Miramar Avenue	,	remont	CA 91	1711	
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS			
(909) 621-5568		jmarquez@tvm	wd.com		
I have used all reasonable diligence in prep herein and in any attached schedules is tru		eviewed this statement a	nd to the best of my knowle	edge the information contained	
I certify under penalty of perjury under t	•				
		-			
Date Signed 12/31/2024 08:3	34 PM	Signature	Jorge Marq	<u> </u>	
imonin day yearl		(HII	🖶 we onomany signed baber statemen	a word voor mino omeial i	



ONOMIC INTERESTS

Date Initial Filing Received
Filing Official Use Only

A PUBLIC DOCUMENT

Filed Date: 03/27/2025 09:48 PM SAN: 072400521-STH-0521

Please type or print in ink.		5/44. 572400021 G111 0021
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Roberto	Mary "Jody"	Jolene
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
Three Valleys Municipal Water D	istrict	
Division, Board, Department, District, if appl	icable	Your Position
		Director
► If filing for multiple positions, list below o	or on an attachment (Do not us	-
	or on an attachment. (Do not as	o doinyma)
Agency: SEE ATTACHED LIST		Position:
O lovindinting of Office on		
2. Jurisdiction of Office (Check at Id	east one box)	_
State		Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County		County of
City of		➤ Other District
3. Type of Statement (Check at least	t one box)	_
Annual: The period covered is Janual December 31, 202 4.	ry 1, 202 4, through	Leaving Office: Date Left/(Check one circle below.)
-or- The period covered is December 31, 202 4.	, through	The period covered is January 1, 2024, through the date of leaving office.
, -		or- The period covered is/, through
Assuming Office: Date assumed		the date of leaving office.
Candidate: Date of Election	and office sought	; if different than Part 1:
4. Schedule Summary (required)	► Total number	of pages including this cover page:6
Schedules attached		
Schedule A-1 - Investments - sche	dule attached	Schedule C - Income, Loans, & Business Positions – schedule attached
▼ Schedule A-2 - Investments – sche	dule attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property − sche	dule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- ☐ None - No reportable intere	ests on any schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public L	CITY	STATE ZIP CODE
1021 East Miramar Avenue	Clarer	mont CA 91711
DAYTIME TELEPHONE NUMBER	<u> </u>	EMAIL ADDRESS
(909) 621-5568		jroberto@tvmwd.com
I have used all reasonable diligence in prepherein and in any attached schedules is tru		ewed this statement and to the best of my knowledge the information contained this is a public document.
·		nia that the foregoing is true and correct.
02/27/2025 00:/	10 DM	Many " Indy" I Islana Baharta
Date Signed 03/27/2025 09:4	+O F IVI	Signature Mary "Jody" Jolene Roberto (File the originally signed paper statement with your filing official.)



Date Initial Filing Received
Filing Official Use Only

A PUBLIC DOCUMENT

Filed Date: 02/11/2025 06:27 PM SAN: 072400521-STH-0521

Ple	ease type or print in ink.			3, 3, 2, 13332. 3111 3321			
NAI	ME OF FILER (LAST)	(FIRST)		(MIDDLE)			
Ti		Mike					
1.	Office, Agency, or Court						
	Agency Name (Do not use acronyms)				_		
	Three Valleys Municipal Water	District					
	Division, Board, Department, District, if ap		Your Position	on	_		
	· · · · · · · · · · · · · · · · · · ·						
	If filling for multiple positions list below	or on on ottock	<u>Director</u>		_		
	▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)						
	Agency:		Position: _		_		
_	Jurisdiction of Office (obs.)	t locat and have			_		
۷.	Jurisdiction of Office (Check at	least one DOX)	□				
	State			etired Judge, Pro Tem Judge, or Court Commissioner surisdiction)			
	Multi-County		County of				
	□ o::		➤ Other D		_		
~	Type of Statement (Check at lea				_		
J.		•		Officer Data Laft			
	Annual: The period covered is January December 31, 2024.	uary 1, 2024, through	∟ Leaving	Office: Date Left//(Check one circle below.)			
		/, throug		period covered is January 1, 2024, through the date of ang office.			
	Assuming Office: Date assumed _	<u> </u>	○ The p	period covered is/, through ate of leaving office.			
	Candidate: Date of Election	and office sou	ght, if different than Pa	irt 1:	_		
4.	Schedule Summary (required) ► Total numb	er of pages inclu	ding this cover page:			
	Schedules attached						
	Schedule A-1 - Investments – sc	hedule attached	Schedule C - Inc	come, Loans, & Business Positions – schedule attached			
	Schedule A-2 - Investments – sc		Schedule D - Inc	Schedule D - Income - Gifts - schedule attached			
	Schedule B - Real Property – sci		Schedule E - Inc	come - Gifts - Travel Payments - schedule attached			
-(or- 🗵 None - No reportable inte	rests on any schedule					
5.	Verification						
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public	c Document)		STATE ZIP CODE	_		
	1021 East Miramar Avenue	•	emont	CA 91711			
	DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		_		
	(909) 621-5568		mti@tvmwd.c	om			
	I have used all reasonable diligence in preherein and in any attached schedules is			and to the best of my knowledge the information contains ument.	ed		
	I certify under penalty of perjury unde	r the laws of the State of Cali	fornia that the forego	ing is true and correct.			
	Date Signed 02/11/2025 06	:-27 PM	Cianatura	Mike Ti			
	Date Signed 02/11/2025 06 (month, day, year,		Signature	File the originally signed paper statement with your filing official.)			