

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
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2/8/2021 11:10:51 AM

SAN: 043000025-LAC-0025

Please type or print in ink.

NAME OF FILER (LAST) **Bowcock** (FIRST) **Brian** (MIDDLE)

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Three Valleys Municipal Water District
Division, Board, Department, District, if applicable
Your Position
Director

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
San Gabriel Basin Water Quality Authority
Agency: _____ Position: **Board Member Alternate**

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 _____
 City of _____ Other **District**

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

Annual: The period covered is January 1, 2020, through December 31, 2020.
-or-
The period covered is _____, through December 31, 2020.
 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, 2020, through the date of leaving office.
-or-
 The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 1

Schedules attached
 Schedule A-1 - Investments – schedule attached **Schedule C - Income, Loans, & Business Positions** – schedule attached
 Schedule A-2 - Investments – 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1021 East Miramar Avenue Claremont CA 91711
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(909) 621-5568 brianbowcock@verizon.net

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 2/8/2021 Signature E-Filed By Brian Bowcock
(month, day, year) (File the originally signed paper statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS
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2/4/2021 4:20:15 PM

SAN: 043000025-LAC-0025

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
De Jesus David D

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Three Valleys Municipal Water District
Division, Board, Department, District, if applicable Your Position
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 _____
 City of _____ Other District _____

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

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

4. Schedule Summary (must complete)

► Total number of pages including this cover page: 4

Schedules attached

Schedule A-1 - Investments – schedule attached **Schedule C - Income, Loans, & Business Positions** – schedule attached
 Schedule A-2 - Investments – 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1021 East Miramar Avenue Claremont CA 91711
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(909) 621-5568 ddejesus@tvmwd.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 2/4/2021 Signature E-Filed By David De Jesus
(month, day, year) (File the originally signed paper statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS
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2/4/2021 4:23:26 PM

SAN: 043000025-LAC-0025

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Goytia Carlos

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Three Valleys Municipal Water District
Division, Board, Department, District, if applicable Your Position
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 _____
 City of _____ Other District

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

Annual: The period covered is January 1, 2020, through December 31, 2020. **Leaving Office:** Date Left _____ (Check one Circle)
-or- The period covered is _____, through _____
 Assuming Office: Date assumed _____ The period covered is January 1, 2020, through the date of leaving office.
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Schedules attached

Schedule A-1 - Investments – schedule attached **Schedule C - Income, Loans, & Business Positions** – schedule attached
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-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1021 East Miramar Avenue Claremont CA 91711
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(909) 621-5568 Cgoytia70@aol.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 2/4/2021 Signature E-Filed By Carlos Goytia
(month, day, year) (File the originally signed paper statement with your filing official.)

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2/23/2021 10:17:28 AM

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Kuhn Robert G

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Three Valleys Municipal Water District
Division, Board, Department, District, if applicable Your Position
Director

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
San Gabriel Basin Water Quality Authority
Agency: _____ Position: **Board Member**

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 _____
 City of _____ Other **District**

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

Annual: The period covered is January 1, 2020, through December 31, 2020.
-or- The period covered is _____, through December 31, 2020.
 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, 2020, through the date of leaving office.
-or-
○ The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete)

► Total number of pages including this cover page: 4

Schedules attached

Schedule A-1 - Investments – schedule attached **Schedule C - Income, Loans, & Business Positions** – schedule attached
 Schedule A-2 - Investments – 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1021 East Miramar Avenue Claremont CA 91711
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(909) 621-5568 bgkuhn@aol.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 2/23/2021 Signature _____
(month, day, year) (File the originally signed paper statement with your filing official.)
E-Filed By Robert Kuhn

STATEMENT OF ECONOMIC INTERESTS
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3/11/2021 8:02:09 PM

SAN: 043000025-LAC-0025

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Roberto Mary Jolene

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Three Valleys Municipal Water District
Division, Board, Department, District, if applicable Your Position
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 _____
 City of _____ Other District _____

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

Annual: The period covered is January 1, 2020, through December 31, 2020. **Leaving Office:** Date Left _____ (Check one Circle)
-or- The period covered is 1/20/2020, through The period covered is January 1, 2020, through the date of leaving office.
 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: _____

4. Schedule Summary (must complete)

► Total number of pages including this cover page: 3

Schedules attached

Schedule A-1 - Investments – schedule attached **Schedule C - Income, Loans, & Business Positions** – schedule attached
 Schedule A-2 - Investments – 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1021 East Miramar Avenue Claremont CA 91711
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(951) 741-5999 jodymroberto@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 3/11/2021 Signature _____ E-Filed By **Mary Roberto**
(month, day, year) (File the originally signed paper statement with your filing official.)

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12/22/2020 2:01:38 PM

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Soto Danielle

1. Office, Agency, or Court

Agency Name
Three Valleys Municipal Water District
Division, Board, Department, District, if applicable
Your Position
Director

► If filing for multiple positions, list below or on an attachment.

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 _____
- City of _____ Other District _____

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

- Annual: The period covered is January 1, 2019, through December 31, 2019. Leaving Office: Date Left _____ (Check one Circle)
- or- The period covered is _____, through December 31, 2019. The period covered is January 1, 2019, through the date of leaving office.
- Assuming Office: Date assumed 12/4/2020 The period covered is _____, through the date of leaving office.
- 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: 1

Schedules attached

- Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule A-2 - Investments - 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

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
1021 East Miramar Avenue Claremont CA 91711
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
() - dsoto@tvmwd.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 12/22/2020 Signature E-Filed By Danielle Soto
(month, day, year) (File the originally signed paper statement with your filing official.)

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12/29/2020 9:17:31 AM

SAN: 043000025-LAC-0025

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Ti Mike

1. Office, Agency, or Court

Agency Name
Three Valleys Municipal Water District
Division, Board, Department, District, if applicable
Your Position
Director

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

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

- State
- Multi-County _____
- City of _____
- Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other **District**

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

- Annual:** The period covered is January 1, 2019, through December 31, 2019.
- or-**
- The period covered is _____, through December 31, 2019.
- Assuming Office:** Date assumed **12/4/2020**
- 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, 2019, through the date of leaving office.
- The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete)

► Total number of pages including this cover page: 1

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

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1021 East Miramar Avenue Claremont CA 91711
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(626) 715-9898 mti@tvmwd.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 12/29/2020 Signature _____
(month, day, year) (File the originally signed paper statement with your filing official.)

E-Filed By Mike Ti