

STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Administration

| PΙε | ase type or print in ink. | e ventri came na menungangangan | |
|---|--|---|--|
| NA | ME OF FILER (LAST) | (FIRST) (MIDDLE) | |
| _ | BUNKER BARBARA CHERI | | |
| 1. | Office, Agency, or Court | | |
| | Agency Name (Do not use acronyms) | M.A | |
| | CITY OF OROVIUE | MAYOR | |
| | Division, Board, Department, District, if applicable | Your Position | |
| | ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) | | |
| | | Position: | |
| | Agency: | rositoti. | |
| _ 2. | Jurisdiction of Office (Check at least one box) | | |
| | State | ☐ Judge or Court Commissioner (Statewide Jurisdiction) | |
| | Multi-County | County of | |
| | □ Multi-County | Other | |
| | A dig of | | |
| 3. | Type of Statement (Check at least one box) | | |
| | Annual: The period covered is January 1, 2013, through | Leaving Office: Date Left/ | |
| | December 31, 2013. | (Check one) The period covered is January 1, 2013, through the date of | |
| | The period covered is/, through December 31, 2013. | leaving office. | |
| | Assuming Office: Date assumed | The period covered is/, through the date of leaving office. | |
| | Candidate: Election year and office sought, if different than Part 1: | | |
| 4. Schedule Summary | | | |
| | Check applicable schedules or "None." Total number of pages including this cover page: | | |
| | 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 | | |
| J. | MAILING ADDRESS STREET CITY | STATE ZIP CODE | |
| (Business or Agency Address Recommended - Public Document) 500 Pomona Anello Oronius Ca 95965 DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL) | | 0, 959155 | |
| | | | |
| | (530)591-9018 | abunkie@gniail.con, | |
| | I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the test 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 Aug. 5, 2014 s | ignature Barbara (Vhen Bunka) | |
| | (month, day, year) | (File the originally signed statement with your filing official.) | |