

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

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BY:

Please type or print in ink. (FIRST) (MIDDLE) NAME OF FILER (LAST) **PATRICK CHARLES** CASPARY 1. Office, Agency, or Court Agency Name (Do not use acronyms) Las Virgenes - Triunfo Joint Powers Authority Your Position Division, Board, Department, District, if applicable Director - Las Virgenes **Board of Directors** ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: _ 2. Jurisdiction of Office (Check at least one box) Judge, Retired Judge, Pro Tem Judge, or Court Commissioner ☐ State (Statewide Jurisdiction) Multi-County Los Angeles/Ventura County of Other City of 3. Type of Statement (Check at least one box) Leaving Office: Date Left _______ Annual: The period covered is January 1, 2023, through December 31, 2023. (Check one circle.) The period covered is January 1, 2023, through the date The period covered is _______, through of leaving office. December 31, 2023. 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: Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments – schedule attached Schedule D - Income - Gifts - schedule attached Schedule A-2 - Investments - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached -or- ☐ None - No reportable interests on any schedule 5. Verification ZIP CODE STATE MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document) CA 91302 Calabasas 4232 Las Virgenes Road DAYTIME TELEPHONE NUMBER EMAIL ADDRESS (818) 251-2100 CCASPARY@LVMWD.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 Signature **Date Signed**

Jour filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
S	Name
	CHARLES P CASPARY

	18
FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000	NAME OF BUSINESS ENTITY
NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: //23	IF APPLICABLE, LIST DATE:
Partnership Income Received of \$500 or More (Report on Schedule C)	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock Other Describe Describe Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: //23	IF APPLICABLE, LIST DATE: //23//23ACQUIRED DISPOSED
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other [Describe] Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE:

Comments: _

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

CHARLES P CASPARY

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Altac Grove Tre	Amgen Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
tobacco	Marmaceuticals
FAIR MARKET VALUE \$\int\\$2,000 - \$10,000 \times \$10,001 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other
Stock Other (Describe)	(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//23	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Internet 5615	
· · · · · · · · · · · · · · · · · · ·	FAIR MARKET VALUE
FAIR MARKET VALUE \$2,000 - \$10,000 \$\sqrt{10,001} \ \sqrt{10,000}	\$2,000 - \$10,000 \$10,000 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$1,000,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other
Stock Other (Describe)	(Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 / /23	/ /23 / /23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Blackrock Inc	Blockstone Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Investment maragement	investment menegements
FAIR MARKET VALUE	FAIR MARKET VALUE \$2,000 - \$10,000 \$\$\$10,001 - \$100,000
\$2,000 - \$10,000 \$100,000 \$100,000 \$100,000 \$100,000	\$100,001 - \$1,000,000 Q s10,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//23//23	//23
ACQUIRED DISPOSED	ACQUIRED DISPOSED

Comments: .

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION Name

CHARLES P CASPARY

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Bridgemon Inc	Bristal Wers Sinh
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
computer chips/ softwire	Momoceuticals
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000
NATURE OF INVESTMENT MOST Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe) Partnership Income Received of \$0 - \$499
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Internet he dings Kature	Financial Services
111111111111111111111111111111111111111	
FAIR MARKET VALUE \$2,000 - \$10,000 \$3,000 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// <u>23</u> // <u>23</u> ACQUIRED DISPOSED	
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Cornbase Global Inc	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Digital Currency Droker	Consumer goods
FAIR MARKET VALUE \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$410,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// 23	
ACQUIRED DISPOSED	I AOGOINED DIGI OCED

Comments: -

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

CHARLES P CASPARY

FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$1,000,000 NATURE OF INVESTMENT Stock Other	GENERAL DESCRIPTION OF THIS BUSINESS FAIR MARKET VALUE \$2,000 - \$10,000
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//23//23 ACQUIRED DISPOSED	//23
FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock Other Describe	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock Describe Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: //23//23 ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE: //23//23
FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: 123 ACQUIRED DISPOSED	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock Other Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: O 1 03/23 ACQUIRED DISPOSED

Comments: _

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

CHARLES P CASPARY

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
General Parts Co	Health Equity
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
State motive Parts	Phomocouteculs
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other(Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//23//23 ACQUIRED DISPOSED	/
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Jame Denot	Honer well Intl. Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
He du ere & Building Supplies	Industrial recorpace
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000\$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
Income Received of \$500 of More (Report of Scriedule O)	Indicate received of word of more prepare of contesses of
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Intercontinental Exc	Johnson + Johnson
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
CILI Claris 5 Dans	Hold Cop Dales
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Other (Describe)
Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
☐ Income Received of \$500 or More (Report on Schedule C)	IF APPLICABLE, LIST DATE:
IF APPLICABLE, LIST DATE:	
ACQUIRED DISPOSED	
AGGGINED / DIGITORES	1 Nodelles Sidi Oses
I.	

Comments: =

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION

CHARLES P CASPARY

TP. 140760 Chase	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Banking	Phormicenticals
FAIR MARKET VALUE) \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$\igcup \frac{1}{N} \\$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	3 38 23 ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Credit Cord services	Phama
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT NO Stock □ Other
(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
restaurents	Insurance
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership Income Received of \$0 - \$499	(Describe) Partnership Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)	☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
// <u>23</u> // <u>23</u> ACQUIRED DISPOSED	
	6

Comments: _

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
S	Name
	CHARLES P CASPARY

Do not attach brokerage or financial statements.

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Wicrosoft Inc	14c Comistal
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
50Ftware	Find Pard As (souchs
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,000 \$100,000 \$100,000 \$100,000 \$100,000	\$2,000 - \$10,000 \$100,001 - \$100,000 \$100,000 \$100,000
NATURE OF INVESTMENT X Stock	NATURE OF INVESTMENT Stock Other
(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//23	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF THIS BUSINESS	NAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF THIS BUSINESS
computer chips	_ tood Products
FAIR MARKET VALUE) \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	//23//23 ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
clothair /sloves	Promoceraticals
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,000 \$100,000 \$100,000 \$100,000 \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
Constitution Cons	Describe (Describe)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//23//23	//23//23 ACQUIRED DISPOSED
Comments:	

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name CHARLES P CASPARY

Do not attach brokerage or financial statements.

NAME OF BUSINESS ENTITY MSA TORAL	Pelo Alto Naturals
GENERAL DÉSCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,000 \$100,000 \$100,000 \$1,000,000	\$2,000 - \$10,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	//23
GENERAL DESCRIPTION OF THIS BUSINESS	NAME OF BUSINESS ENTITY PARE OF BUSINESS ENTITY GENERAL DESCRIPTION OF THIS BUSINESS
Metroleum / Net Cas	FAIR MARKET VALUE
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$\square \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT	\$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT
Stock Other (Describe)	Stack Other (Describe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
industrial encuerando doste	weeks collection precueling
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe) Partnership Income Received of \$0 - \$499	(Describe) Partnership Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)	☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Ī	Name
l	CHARLES P CASPARY

Do пот аттаст ргокегад	e or tinancial statements.
NAME OF BUSINESS ENTITY	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: ///23 ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE: //23//23 ACQUIRED DISPOSED
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock Other Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE:
	ACQUIRED J. J23 DISPOSED

Comments: __

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION Name

CHARLES P CASPARY

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
West Disney (4	11 Visa Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Entertainment	Il and the neds
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other(Describe)
Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
IE ADDITOADLE LIST DATE.	IE ADDITICADI E LICT DATE:
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//23//23 ACQUIRED DISPOSED	//23//23
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY &
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
E. 1	1 1 1 1
Morma	real estrate Trust
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
Income Received of \$500 of More (Report of Schedule C)	Income necessed of \$500 of More (Report of Schedule of
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
(22)	/ /23 // /23
	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
wiste l'anagement	West Usney Co
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
water allestin received	ontentainment
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \hstar \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other(Describe)
Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	☐ Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//23	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
·	

Comments: =

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
CHARLES P CASPARY

	► 1. BUSINESS ENTITY OR TRUST
ADATA 9	Cropping Family Trust
P.O. Box 8625, Calabuses CA 91372	P.O. Box 8625, Calchesus CA 91372
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Partner	YOUR BUSINESS POSITION Trustee
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$100,000 OVER \$100,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below
Pedro Castro Ysrael Avila	None or Names listed below 5 R 5 Holdings Property Irlanagement Specialists
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Yrs. remaining Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 - Schedule A-2 (2023/2024

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
CHARLES P CASPARY

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 379-018-004 CITY	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 2649-000-045 CITY LIDEN HILS FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 23 23 23
NATURE OF INTEREST Mature Commercial Commercial	NATURE OF INTEREST Ownership/Deed of Trust Leasehold Yrs. remaining Other IF RENTAL PROPERTY, GROSS INCOME RECEIVED \$0 - \$499 \$500 - \$1,000 \$10,001 - \$100,000 SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None Roperty Management Treadist lending institution made in the lender's regular course of
	lending institution made in the lender's regular course of vithout regard to your official status. Personal loans and ess must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
CHARLES P CASPARY

▶ 1, INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
_LI MATAGIA	Cospany tomby Trest
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
Mrs. Box 8625 Coldonas CA	120.000 8605, Calabouses CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY IF ANY, OF SOURCE
rental property	rental Property
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2017is1	Trustee
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000	\$500 - \$1,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of(Real property, car, boat, etc.)
(Real property, car, boat, etc.)	Loan repayment
Commission or Rental Income, Jist each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Podr Castro Israel Avia	Property Management Specialists
(Describe)	10 S 11 (Pescribe)
Other	Other 5 K 5 10 Wings
(Describe) ➤ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	#5,000(NOOM)
a retail installment or credit card transaction, made in the	lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available
	status. Personal loans and loans received not in a lender's
regular course of business must be disclosed as follows	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
NAME OF EERBER	
ADDRESS (Business Address Acceptable)	%
Annual An	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	_
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	(Describe)
Comments:	

SCHEDULE D Income - Gifts

► NAME OF SOURCE (Not an Acronym) METROPOLITAN WATER DISRTICT	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable) 700 N. ALAMEDA STREET, LOS ANGELES	ADDRESS (Business Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
WHOLESALE WATER SALES AND TREAT	MENT
DATE (mm/dd/yy) VALUE DESCRIPTION OF	GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
05 17 23 11.50 HAT,JOURNA	AL,PEN \$
11 01 23 11.50 HAT,JOURNA	<u> </u>
	\$
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF	GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
//_ \$	
	\$\
► NAME OF SOURCE (Not an Acronym)	▶ NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF	GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
Comments:	

SCHEDULE E Income - Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
CHARLES P CASPARY

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.

• For gifts of travel, provide the travel destination	11.
▶ NAME OF SOURCE (Not an Acronym) METROPOLITAN WATER DISTRICT	► NAME OF SOURCE (Not an Agronym) METROPOLITAN WATER DISTRICT
ADDRESS (Business Address Acceptable) 700 N. ALAMEDA STREET	ADDRESS (Business Address Acceptable) 700 N. ALAMEDA STREET
CITY AND STATE LOS ANGELES, CA 90012	CITY AND STATE LOS ANGELES, CA
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE WHOLESALE WATER SALES AND TREATMENT	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE WHOLESALE WATER SALES AND TREATMENT
DATE(S): 05 / 17 /23 / (If gift) AMT: \$ 30.04	DATE(S): 11 / 01 / 23 - / / AMT: \$ 35.14
► MUST CHECK ONE: ■ Gift -or- □ Income	► MUST CHECK ONE: Gift -or- Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide DescriptionLUNCH AND SNACKS	Other - Provide Description LUNCH AND SNACKS
► If Gift, Provide Travel Destination MWD INSPECTION TRIP SEPULVEDA PRESSURE REDUCING STATION	► If Gift, Provide Travel Destination DIAMOND VLLEY LAKE
▶ NAME OF SOURCE (Not an Acronym)	▶ NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/AMT: \$	DATE(S)://
► MUST CHECK ONE: ☐ Gift -or- ☐ Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
► If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
	<u> </u>
Comments:	ž.
Comments.	