

# CERTIFICATE OF ELECTION & OATH OF OFFICE

THIS CERTIFIES, that at the Consolidated District Election on November 7, 2017

## *Cindy Winter*

was appointed in lieu of election to the  
Mountain Valley Unified School District as a Board Member, expiring December 3, 2021.

IN WITNESS WHEREOF, I hereunto affixed  
my hand and the seal of the County of Trinity this 6th day of November 2017.

*Shanna S. White*

Shanna S. White,  
Trinity County Clerk/Registrar of Voters

STATE OF CALIFORNIA  
County of Trinity } ss.

### RECEIVED

JAN 16 2018

TRINITY COUNTY  
CLERK/RECORDER/ASSESSOR

I, Cindy Winter, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter.

Signature: *Cindy Winter*

Subscribed and sworn to (or affirmed) before me, this 11 day of December, 2017

Signature of person administering oath: *W. G. Miller*

**CANDIDATE DOCUMENTS CHECKLIST – 11/07/2017  
CONSOLIDATED DISTRICT ELECTION**

AUG 10 2017

Document	Date Due	Date Received by Candidate	Date Filed by Candidate
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<b>REQUIRED FORMS</b>			
Declaration of Candidacy	08/11/17		8-10-17
FPPC Form 700 - Statement of Economic Interest	08/11/17		8-10-17
FPPC Form 501 - Candidate Intention Statement	08/11/17		8-10-17
Department of Transportation - Signs	08/11/17		8-10-17
FPPC Form 470 - Officeholder & Candidate Campaign Statement <u>OR</u> FPPC Form 460 - Receipt Committee Campaign Statement	08/11/17		8-10-17

<b>OPTIONAL FORMS</b>			
Code of Fair Campaign Practices	08/11/17		8-10-17
Candidate Statement of Qualifications & Fee	08/11/17		
FPPC Form 410 - Statement of Organization	See Schedule		

<b>OTHER RESOURCES AVAILABLE</b>			
Candidate Guide			
FPPC Filing Schedule			

Issued by \_\_\_\_\_ Date \_\_\_\_\_

MATERIALS INDICATED ABOVE WERE ISSUED TO ME AS NOTED AND I AM AWARE OF THE FILING DEADLINE OF **AUGUST 11, 2017** FOR DECLARATION OF CANDIDACY.

Name: Cynthia R. Winter

Office of Candidacy: School Board member

Mailing Address: 

Physical Address: 

Email Address: 

Phone: 

Candidate's Signature Cynthia R. Winter Date 8-8-17

OFFICIAL FILING FORM  
Shanna S. White  
County Elections Official  
By: \_\_\_\_\_ Deputy  
Date Issued: \_\_\_\_\_

OFFICIAL FILING FORM  
**RECEIVED**  
AUG 10 2017  
TRINITY COUNTY  
CLERK/RECORDER/ASSESSOR

# Declaration of Candidacy

(Election Code §§ 10511, 10512)  
Consolidated District Election

Term of Office: \_\_\_\_\_ 2 YR. Term (Completion of Unexpired Term)  
(Select one)  4 YR. Term (Full Term)

I, Cynthia Winter hereby declare myself a candidate for election to the office of  
(Candidate Name)  
Director MVUSD Area 1 in the jurisdiction of Trinity County  
(Name of Office) (District Name) (Name of County)

to be voted for at the Consolidated District Election to be held on November 7, 2017 and declare the following to be true:

I request my name and occupational designation to appear on the ballot as follows:

Cindy Winter  
Print Your Name for Use on the Ballot  
none (appointed incumbent)  
Print Ballot Designation (maximum 3 words)  
Candidate initials if preferring no designation:  
Note: A ballot designation is optional. If no ballot designation is requested, write in the word "NONE" and initial in box as indicated.

Residence Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone: \_\_\_\_\_  
Area Code \_\_\_\_\_ Daytime \_\_\_\_\_ Area Code \_\_\_\_\_ Evening \_\_\_\_\_

FAX and e-mail: ( ) \_\_\_\_\_  
Area Code \_\_\_\_\_ FAX \_\_\_\_\_ e-mail \_\_\_\_\_

I am filing a Candidates' Statement of Qualifications: YES \_\_\_\_\_ NO

I am requesting Candidates' Statement not to be printed if no opposition. \_\_\_\_\_

**IMPORTANT: BACK SIDE OF PAGE MUST BE COMPLETED**

I meet the statutory and constitutional qualifications for this office (including but not limited to voter registration in jurisdiction, citizenship, residency, and party affiliation, if required).  
I am a registered voter in the precinct in which I reside.

If nominated/elected I will accept the nomination/office and not withdraw.

8-10-17 Date Cynthia R. W Signature of Candidate

State of California  
County of Trinity } ss.

Subscribed and sworn to before me this 10 day of August, 2017

Shanna S. White, County Clerk/Recorder/Assessor

[Signature]  
By Deputy

I am aware that any person who files or submits for filing a declaration of candidacy knowing that it or any part of it has been made falsely is punishable by a fine or imprisonment, or both, as set forth in Sec. 18203 of the Elections Code.

WARNING: Every person acting on behalf of a candidate is guilty of a misdemeanor who deliberately fails to file at the proper time and in the proper place any declaration of candidacy in his/her possession which is entitled to be filed under the provisions of the Elections Code.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Cynthia R. W Signature of Candidate

**Oath of Office**

I, Cynthia R. Winter, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter.

Cynthia R. W Signature of Candidate

State of California  
County of Trinity } ss.

Subscribed and sworn to before me this 10 day of August, 2017

Shanna S. White, County Clerk/Recorder/Assessor

[Signature]  
By Deputy

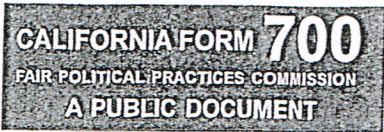
**FOR COUNTY ELECTIONS OFFICIAL USE ONLY**

I hereby certify that I have examined this declaration pursuant to California Elections Code Section 10513 and find it to be sufficient.

Shanna S. White, County Clerk/Recorder/Assessor

By: \_\_\_\_\_  
Deputy

Date: \_\_\_\_\_



STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

RECEIVED
Date Initial Filing Received
Official Use Only
AUG 10 2017

TRINITY COUNTY
CLERK/RECORDER/ASSESSOR

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Winter Cynthia Ruth

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

MVUSD Area 1
Division, Board, Department, District, if applicable School Board member
Your Position member

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position: member

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

- State
Multi-County
City of
Judge or Court Commissioner (Statewide Jurisdiction)
County of Trinity
Other

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

- Annual: The period covered is January 1, 2016, through December 31, 2016.
-or- The period covered is through December 31, 2016.
Leaving Office: Date Left
Assuming Office: Date assumed
Candidate: Election year 2017 and office sought, if different than Part 1:

4. Schedule Summary (must complete)

Total number of pages including this cover page: 2

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

MAILING ADDRESS STREET CITY STATE ZIP CODE
DAYTIME TELEPHONE NUMBER

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 8-10-17
(month, day, year)

Signature Cynthia R. Winter
(File the originally signed statement with your filing official.)

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TRINITY COUNTY  
CLERK/RECORDER/ASSESSOR

SCHEDULE B  
Interests in Real Property  
(Including Rental Income)

CALIFORNIA FORM 700  
FAIR POLITICAL PRACTICES COMMISSION  
Name \_\_\_\_\_

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
[REDACTED]  
CITY \_\_\_\_\_  
FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000  
IF APPLICABLE, LIST DATE: \_\_\_\_\_/\_\_\_\_\_/16  
ACQUIRED DISPOSED  
NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining  Other \_\_\_\_\_  
IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$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

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
\_\_\_\_\_  
CITY \_\_\_\_\_  
FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000  
IF APPLICABLE, LIST DATE: \_\_\_\_\_/\_\_\_\_\_/16  
ACQUIRED DISPOSED  
NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining  Other \_\_\_\_\_  
IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$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

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_  
ADDRESS (Business Address Acceptable) \_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_  
INTEREST RATE \_\_\_\_\_%  None TERM (Months/Years) \_\_\_\_\_  
HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_  
ADDRESS (Business Address Acceptable) \_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_  
INTEREST RATE \_\_\_\_\_%  None TERM (Months/Years) \_\_\_\_\_  
HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

Candidate Intention Statement

Check One:  Initial  Amendment (Explain) \_\_\_\_\_

<b>RECEIVED</b> <small>Date Stamp</small> AUG 10 2017 TRINITY COUNTY CLERK/RECORDER/ASSESSOR	<b>CALIFORNIA FORM 501</b> <small>For Official Use Only</small>

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Cynthia R. Winter DAYTIME TELEPHONE NUMBER \_\_\_\_\_ FAX NUMBER (optional) \_\_\_\_\_ E-MAIL \_\_\_\_\_

STATE \_\_\_\_\_

OFFICE SOUGHT (POSITION TITLE) School Board member AGENCY NAME MVUSD Area 1 DISTRICT NUMBER, if applicable N/A  NON-PARTISAN PARTY: N/A

OFFICE JURISDICTION  
 State (Complete Part 2.)  
 City  County  Multi-County: \_\_\_\_\_ (Name of Multi-County Jurisdiction) 2017 (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

\_\_\_\_\_  
(Year of Election) Primary/general election \_\_\_\_\_  
(Year of Election) Special/runoff election

(Check one box)

I accept the voluntary expenditure ceiling for the election stated above.

I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

I did not exceed the expenditure ceiling in the primary or special election held on: \_\_\_\_\_ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

On \_\_\_\_\_, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

N/A

3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 8-10-17  
(month, day, year)

Signature Cynthia R. Winter  
(Candidate)

DEPARTMENT OF TRANSPORTATION  
DIVISION OF TRAFFIC OPERATIONS  
OUTDOOR ADVERTISING PROGRAM

AUG 10 2017

TRINITY COUNTY  
CLERK/RECORDER/ASSESSOR



### STATEMENT OF RESPONSIBILITY FOR TEMPORARY POLITICAL SIGNS

Election Date: \_\_\_\_\_ June \_\_\_\_\_  November \_\_\_\_\_ Other: \_\_\_\_\_

Candidate's Name: Cynthia Winter

Office sought or Proposition Number: School Board Member

County where sign(s) will be placed: Trinity

Number of signs to be placed: none

RESPONSIBLE PARTY:

Name: Cynthia Winter

Address: [Redacted]

[Redacted]

Phone Number (Include Area Code) [Redacted]

The undersigned hereby accepts responsibility for the removal of Temporary Political Signs placed pursuant to Section 5405.3 of the Outdoor Advertising Act for the above candidate or proposition.

It is understood and agreed that any Temporary Political Signs placed sooner than ninety (90) days prior to the election and/or not removed within ten (10) days after the election, may be removed by the Department and the responsible party will be billed for any associated removal costs.

Cynthia R. Winter  
SIGNATURE OF RESPONSIBLE PARTY

8-10-17  
DATE

**Mail Statement of Responsibility to:**

Division of Traffic Operations  
Outdoor Advertising Program  
P.O. Box 942874, MS-36  
Sacramento, CA 94274-0001



Officeholder and Candidate  
Campaign Statement -  
Short Form

Date of election if applicable: (Month, Day, Year)  11-7-17	<input type="checkbox"/> Amendment (Explain Below)  _____ _____	RECEIVED Date Stamp AUG 10 2017 TRINITY COUNTY CLERK/RECORDER/ASSESSOR	CALIFORNIA FORM 470
			For Official Use Only

1. Statement Covers Calendar Year 20 17.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE  
Cynthia Winter

STREET ADDRESS  
[REDACTED]

CITY  
[REDACTED]

STATE  
[REDACTED]

ZIP CODE  
[REDACTED]

3. Office Sought or Held

OFFICE SOUGHT OR HELD  
School Board member

JURISDICTION (LOCATION)  
MVUSD Area I

DISTRICT NUMBER  
(IF APPLICABLE)

4. Committee Information

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER
<u>None</u>		

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 8-10-17 DATE

By Cynthia R. Winter SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Clear Form      Print Form

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AUG 10 2017

CODE OF FAIR CAMPAIGN PRACTICES  
(ELECTIONS CODE § 20440)

TRINITY COUNTY  
CLERK/RECORDER/ASSESSOR

There are basic principles of decency, honesty, and fair play which every candidate for public office in the State of California has a moral obligation to observe and uphold in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional right to a free and untrammelled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

- (1) I SHALL CONDUCT my campaign openly and publicly, discussing the issues as I see them, presenting my record and policies with sincerity and frankness, and criticizing without fear or favor the record and policies of my opponents or political parties that merit this criticism.
- (2) I SHALL NOT USE OR PERMIT the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or his or her personal or family life.
- (3) I SHALL NOT USE OR PERMIT any appeal to negative prejudice based on a candidate's actual or perceived race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, age, sexual orientation, sex, including gender identity, or any other characteristic set forth in Section 12940 of the Government Code, or association with another person who has any of the actual or perceived characteristics set forth in Section 12940 of the Government Code.
- (4) I SHALL NOT USE OR PERMIT any dishonest or unethical practice that tends to corrupt or undermine our American system of free elections, or that hampers or prevents the full and free expression of the will of the voters including acts intended to hinder or prevent any eligible person from registering to vote, enrolling to vote, or voting.
- (5) I SHALL NOT coerce election help or campaign contributions for myself or for any other candidate from my employees.
- (6) I SHALL IMMEDIATELY AND PUBLICLY REPUDIATE support deriving from any individual or group that resorts, on behalf of my candidacy or in opposition to that of my opponent, to the methods and tactics that I condemn. I shall accept responsibility to take firm action against any subordinate who violates any provision of this code or the laws governing elections.
- (7) I SHALL DEFEND AND UPHOLD the right of every qualified American voter to full and equal participation in the electoral process.

I, the undersigned, candidate for election to public office in the State of California or treasurer or chairperson of a committee making any independent expenditures, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct my campaign in accordance with the above principles and practices.

Cynthia R. Winter

Print Name

Cynthia R. Winter

Signature

8-10-17

Date

MVUSD Area 1

Office