

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

QS(e) (la	1	ing	Received	
FEB	2	0	2024	
BY:			1	

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
CASPARY	CHARLES	PATRICK	
1. Office, Agency, or Court			
Agency Name (Do not use acrony	ms)		
Las Virgenes Municipal W	ater District		
Division, Board, Department, District	t, if applicable	Your Position	
Board of Directors		Director	
▶ If filing for multiple positions, list	below or on an attachment. (Do not use	acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Ch	eck at least one box)		
State		Judge, Retired Judge, Pro Tem Judge, (Statewide Jurisdiction)	or Court Commissioner
Multi-County		County of Los Angeles	
		Other	
3. Type of Statement (Check	at least one box)		
Annual: The period covered in December 31, 2023.	s January 1, 2023, through	Leaving Office: Date Left/(Check one circle	
The period covered in December 31, 2023.	s/, through	The period covered is January 1, 2 of leaving office.	
Assuming Office: Date assu	med/	☐ The period covered is/ the date of leaving office.	_/, through
Candidate: Date of Election	and office sought,	if different than Part 1:	
4. Schedule Summary (requ	uired) ► Total number	of pages including this cover page:	16
Schedules attached	•	. •	.,150
Schedule A-1 - Investments	s – schedule attached	Schedule C - Income, Loans, & Business Positi	tions - schedule attached
Schedule A-1 - Investments		Schedule D - Income - Gifts - schedule attach	
Schedule B - Real Property		Schedule E - Income - Gifts - Travel Payment	ts - schedule attached
	e interests on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended)		STATE	ZIP CODE
4232 Las Virgenes Road	Calaba	sas CA	91302
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(818) 251-2100		CCASPARY@LVMWD.COM	the information contained
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	ia that the foregoing is true and convect.	
Date Signed 2-16-2	Jay, vear) Sig	gnature (File the originally signed paper statelinent/w	Ill your filing official.)

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

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

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

Ownership interest is Less Than

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
Altor Grove Tre	Amgen Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
tobacco	Marmaceuticals
FAIR MARKET VALUE	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
\$2,000 - \$10,000 \$100,000 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:
/	
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Internet Sals	computers/telephones
FAIR MARKET VALUE	FAIR MARKET VALUE ☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
\$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,000 - \$100,000 Over \$1,000,000
	NATURE OF INVESTMENT
NATURE OF INVESTMENT Stock Other	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
Black cools Inc.	Blockstone Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Investment maragement	Investment managements
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
S100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT Stock Other	Stock Other
☐ 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	

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

CHARLES P CASPARY

	71 L
NAME OF BUSINESS ENTITY	FAIR MARKET VALUE \$2,000 - \$10,000
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)
IF APPLICABLE, LIST DATE: //23	IF APPLICABLE, LIST DATE: 1/01/23 / /23 ACQUIRED DISPOSED
FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$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)	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:
FAIR MARKET VALUE \$\int_{\}\$2,000 - \$10,000 \ \text{\$100,000} \ \text{\$100,000} \ NATURE OF BUSINESS ENTITY Concluded Subsets \text{\$100,000} \	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)	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: //23

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
Constell atom Branks	Concast Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Liquor + whes	Telephone Internet (dable
FAIR MARKET VALUE \$2,000 - \$10,000 \$510,001 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$10,000 \$\frac{10000}{2}\$100,000 \$\frac{100000}{2}\$100,000	\$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
Edwards Lite Schences	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	Environmental Services
Marie Cul leas	
FAIR MARKET VALUE \$2,000 - \$10,000 \$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 (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	
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	Fustional Inc
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Finted processing	Industrial Hidware
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001	\$2,000 - \$10,000 \$310,001 - \$100,000 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)
IF APPLICABLE, LIST DATE:	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 FAIR POLITICAL PRACTICES COMMISSION

Name

CHARLES P CASPARY

NAME OF BUSINESS ENTITY PORTS	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
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 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:
/ /23 /23 ACQUIRED DISPOSED	
September Sept	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT Stock NAME OF BUSINESS ENTITY \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000
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: //23	IF APPLICABLE, LIST DATE: //23
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF THIS BUSINESS FAIR MARKET VALUE \$\int_{\text{S2,000}} \cdot \text{\$10,000} \text{\$10,001} \cdot \text{\$100,000} \text{\$1000,000} \text{\$1000,000} \text{\$1000,000} \text{\$1000,000} \text{\$1000,000} \text{\$1000,000} \text{\$1000,000} \text{\$1000,000} \text{\$1000,000} \te
IF APPLICABLE, LIST DATE: 7/17/23 ACQUIRED DISPOSED	IF APPLICABLE, LIST DATE: //23

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
JP 1 Jagon Chase	Eli Lilly & Co
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Banking	Phomicentreals
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,000 Over \$1,000,000	\$2,000 - \$10,000
	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:
	3 3 3 23 23 ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Mastercord The	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	
Credit Cord Services	_ Phama
FAIR MARKET VALUE \$2,000 - \$10,000 \$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 (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:
ACQUIRED DISPOSED	
	► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
n 1	
restaurents	FAIR MARKET VALUE
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	\$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 Stock Other	NATURE OF INVESTMENT Stock Other
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	ACQUIRED DISPOSED

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
Wicrosoft to	10/c Camickella
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
software	Land Pool As (spices
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$\times \$100,001 - \$1,000,000	\$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 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
Microchio Technology	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
computer chips	_ Took Products
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,000 \$100,000 \$100,000 \$100,000	\$2,000 - \$10,000 \$100,000 Over \$1,000,000
	NATURE OF INVESTMENT
NATURE OF INVESTMENT Stock Other	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:
5/11/23	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Nike Inc	Now Nordisk
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
clothing/shoes	Mamaceletrals
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT N Stock Other	NATURE OF INVESTMENT Stock Other
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:
//23	ACQUIRED DISPOSED
7.0401112	11

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

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

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 DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
investment broker	Fond / Barrages
FAIR MARKET VALUE	FAIR MARKET VALUE \$10,001 - \$10,000
\$2,000 - \$10,000 \$100,000 Qver \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other (Supply)
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
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Banking.	<u>raelroseds</u>
FAIR MARKET VALUE	FAIR MARKET VALUE \$\int\\$2,000 - \\$10,000 \\$\\$10,001 - \\$100,000
\$2,000 - \$10,000 \$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) 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:
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
United Health Group	_ untod Paroel Service
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 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	

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

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)	NAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF THIS BUSINESS 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 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
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)	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:	IF APPLICABLE, LIST DATE: //23
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)	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)
	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	▶ 1. BUSINESS ENTITY OR TRUST
ADAJAY LLC	Cospan Family Trust
Pro Box 8625, Calabusés CA 91372	1.0 Box 8605 Calchosus CA 91372
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 \$0ver \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION Tartner	YOUR BUSINESS POSITION Trustee
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO 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 \$1,000 • \$1,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 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 5R5 Holdings Property I lanagement 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	☐ INVESTMENT 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	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
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 23
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold 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

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	
CHARLES P CASPARY	

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS CITY Los Deposition FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 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	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 2649-000-045 CITY FAIR MARKET VALUE
income of \$10,000 or more. None SRS Holdings	income of \$10,000 or more. None Property Monogement specialist
* You are not required to report loans from a commercia business on terms available to members of the public loans received not in a lender's regular course of busin	I lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, HE ANY, OF LENDER	ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years) ———————————————————————————————————
-	

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
ADATAM LLe	Cospany tomby past
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
Pagasthas Coldans CA	1:0,000 8605 Calabuses CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
central property	rental Property
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Victor	toste
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,000	\$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
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(Real property, car, boat, etc.)	Sale of(Real property, car, boat, etc.)
Loan repayment	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
Podro Castro Israel Avila	Property Management Specialists
(Describe)	Describe)
Other	Other Other (Describe)
(Describe)	We-essay rest
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	
* You are not required to report loans from a commercial	lending institution, or any indebtedness created as part of ne lender's regular course of business on terms available
a retail installment or credit card transaction, made in the	status. Personal loans and loans received not in a lender's
regular course of business must be disclosed as follows	s:
Togardi codico di succiona in acciona	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	% None
ADDRESS (Business Address Acceptable)	\
	SECURITY FOR LOAN None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	
	Real Property Street address
HIGHEST BALANCE DURING REPORTING PERIOD	Siled addiess
\$500 - \$1,000	City
\$1,001 - \$10,000 \	Guarantor
\$10,001 - \$100,000	
	V
OVER \$100,000	Other
	Other(Describe)

SCHEDULE D Income – Gifts



▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
METROPOLITAN WATER DISRTICT	1
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
700 N. ALAMEDA STREET, LOS ANGELES, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY OF SOURCE
WHOLESALE WATER SALES AND TREATMENT	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
05 17 23 11.50 HAT,JOURNAL,PEN	\$
11 01 23 11.50 HAT,JOURNAL,PEN	\$
\$	
NAME OF COURSE (Not as Assessed)	► NAME OF SOURCE (Not an Acronym)
► NAME OF SOURCE (Not an Acronym)	NAME OF SOURCE (Not all Actoryth)
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



- 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 gins of travel, provide the travel destinatio ► NAME OF SOURCE (Not an Acronym)	▶ NAME OF SOURCE (Not an Acronym)
METROPOLITAN WATER DISTRICT	METROPOLITAN WATER DISTRICT
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
700 N. ALAMEDA STREET	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
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE WHOLESALE WATER SALES AND TREATMENT	WHOLESALE WATER SALES AND TREATMENT
DATE(S): 05 17 23 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 MWD INSPECTION TRIP
▶ 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
Comments:	