STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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PΙε	ease type or print in ink.			
NΑ	ME OF FILER (LAST)	(FIRST)	(MIDDLE)	
Ρ	resant	Stephen	John	
1.	Office, Agency, or Court			
	Agency Name (Do not use acronyms) Tulare Public Cemetery District			
	Division, Board, Department, District, if applica	ble	Your Position	
			Trustee	
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)				
	Agency:		Position:	
_ 2.	Jurisdiction of Office (Check at leas	t one box)		
	State		Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)	
	Multi-County		County of	
	City of		Other Special District	
_ 3.	Type of Statement (Check at least or	Other Special District Leaving Office: Date Left/		
	Annual: The period covered is January December 31, 2024.	•		
	The period covered is/_ December 31, 2024.	, through	leaving office.	
	Assuming Office: Date assumed	J	☐ The period covered is/, through the date of leaving office.	
	Candidate: Date of Election	and office sought	nt, if different than Part 1:	
4.	Schedule Summary (required) ► Total number of pages including this cover page: One			
	Schedules attached			
	Schedule A-1 - Investments – schedul	e attached	Schedule C - Income, Loans, & Business Positions – schedule attached	
	Schedule A-2 - Investments – schedul	e attached	Schedule D - Income - Gifts - schedule attached	
	Schedule B - Real Property – schedul	e attached	Schedule E - Income - Gifts - Travel Payments - schedule attached	
-or- ☑ None - No reportable interests on any schedule				
5.	Verification			
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docu	CITY	STATE ZIP CODE	
	900 East Kern Ave	Tulare	Ca 93274	
	DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
	(559) 686-5544		sp.board@tularecemetery.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.			
			Stophen Resant	
	Date Signed 1/27/2025		Signature	
	(month, day, year)		(File the originally signed paper statement with your filing official.)	