

## STATEMENT OF ECONOMIC INTERESTS Date Initial Filing Received Filing Official Use Only **COVER PAGE**

A PUBLIC DOCUMENT

Please type or print in ink.			
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
Bernardo	Clara	Lucia	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
Tulare Public Cemetery Dist	trict		
Division, Board, Department, District, if applicable		Your Position	
District		District Manager	
► If filing for multiple positions, list below or o	n 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 on			
	if		
Annual: The period covered is January 1, 2024, through December 31, 2024.		Leaving Office: Date Left/(Check one circle below.)	
-or- The period covered is	31 , 2025	The period covered is January	#2 (942) C (1864) C (4664) C (47€)
December 31, 2024.	, through	leaving office.	1, 2024, unough the date of
Assuming Office: Date assumed			
Candidate: Date of Election	and office sought,	if different than Part 1:	
4. Schedule Summary (required)	► Total number	of pages including this cover pag	٠,٠
Schedules attached		or pages meaning and core, pag	
Schedule A-1 - Investments - schedule	e attached	Schedule C - Income, Loans, & Business	Positions - schedule attached
		Schedule D - Income - Gifts - schedule a	
Schedule B - Real Property - schedule	e attached	Schedule E - Income - Gifts - Travel Pay	ments - schedule attached
-or- Vone - No reportable interests	on any schedule		w.
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docu	CITY	STATE	ZIP CODE
900 E. Kern Avene	Tulare	CA	93274
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	00211
(559 ) 686-5544		clara@tularecemetery.net	
I have used all reasonable diligence in preparing herein and in any attached schedules is true a	g this statement. I have review nd complete. I acknowledge the	ved this statement and to the best of my kno	wledge the information contained
I certify under penalty of perjury under the	laws of the State of Californi	ia that the foregoing is true and correct.	
Date Signed 01/27/2025	e:.	anatura //	
(month, day, year)		gnature (File the originally signed paper state)	ment with your filing official )