

COVER PAGE

A PUBLIC DOCUMENT

2019 MAR 29 PM 1:27

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
WASHINGTON GREGORY CHRISTOPHER

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
ROSAMOND COMMUNITY SERVICE DISTRICT (DIRECTOR)
 Division, Board, Department, District, if applicable Your Position
BOARD OF DIRECTOR

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

Agency: _____ Position: _____

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

- State
- Multi-County _____
- City of _____
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of KERN
- Other SPECIAL DISTRICT

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

- Annual: The period covered is January 1, 2018, through December 31, 2018.
 -or- The period covered is ____/____/____, through December 31, 2018.
- Assuming Office: Date assumed 3/8/2019
- Leaving Office: Date Left ____/____/____
 (Check one circle.)
- The period covered is January 1, 2018, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.
- Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 1

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
3179 35TH ST WEST ROSAMOND, CALIFORNIA 93560
 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(661) 900-5208 GWASH472@YAHOO.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.

Date Signed 3/29/2019
 (month, day, year)

Signature [Handwritten Signature]
 (File the originally signed paper statement with your filing official.)