STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received Filing Official Use Only

A PUBLIC DOCUMENT

Please type or print in ink.			
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)	
KNEE	CODY		
1. Office, Agency, or Court			
Agency Name (Do not use acronyms) KEYES COMMUNITY SERVICES I	DISTRICT		
Division, Board, Department, District, if applical	ole	Your Position	
DISTRICT		DIRECTOR	
▶ 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 DISTRICT	
3. Type of Statement (Check at least or	ne box)		
Annual: The period covered is January 1	1	Leaving Office: Date Left/ (Check one circ	
The period covered is/_ December 31, 2022.	, through	The period covered is January 1, leaving office.-or-	2022, through the date of
Assuming Office: Date assumed	<u> </u>	The period covered is/ the date of leaving office.	/, through
Candidate: Date of Election	and office sought, i	f different than Part 1:	
4. Schedule Summary (required)	► Total number of	of pages including this cover page:	· · · · · · · · · · · · · · · · · · ·
Schedules attached			
Schedule A-1 - Investments – schedule attached Schedule C - Income, Loans, & Business Positions – schedule attached			
Schedule A-2 - Investments – schedule attached Schedule D - Income – Gifts – schedule attached			
Schedule B - Real Property - schedule	e attached	Schedule E - Income - Gifts - Travel Paymer	nts - schedule attached
N			
-or- None - No reportable interests	s on any schedule		
5. Verification MAILING ADDRESS STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Public Docu	ment)		
P O BOX 699	KEYES	EMAIL ADDRESS	95328
DAYTIME TELEPHONE NUMBER (209) 668-8341		KNEE31681@GMAIL.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.			
Data Signad 1-77-74	ei,	inature	
Date Signed /- 23 - 24 (month, day, year)		(File the originally signed paper statement	with your filing official.)