

**California Democratic Party  
Financial Disclosure Statement of Statewide Officers and  
Notice of Acquisition of Material Financial Interest**

Please complete this form and submit to the CDP Office to [yvette@cadem.org](mailto:yvette@cadem.org). An electronic version of this form is downloadable at [www.cadem.org/rulescommittee](http://www.cadem.org/rulescommittee). Quarterly Financial Disclosure Statement of Statewide Officers is due quarterly by April 15 (Quarter 1), July 15 (Quarter 2), October 15 (Quarter 3), and January 15 (Quarter 4). Notice of Acquisition of Material Financial Interest is due fifteen (15) days after acquiring the material financial interest. Please use more than one form for your filing if necessary.

(Page 1 of 2)

**General Information**

Filing Date (mm/dd/yy): 01/01/2024 CDP Position: Secretary

**Type of Filing (Please check the appropriate box):**

- Quarterly Financial Disclosure Statement of Statewide Officers (Due 15th of the month after each quarter)  
 Notice of Acquisition of Material Financial Interest (Due 15 days after acquiring)

Filing Year: \_\_\_\_\_

**Please check the appropriate box denoting the quarter for which this form is filed.**

- Quarter 1 (January – March)  
 Quarter 2 (April – June)  
 Quarter 3 (July – September)  
 Quarter 4 (October – December)

**Statewide Officer Information**

Name: Diana Love Email: diana@cadem.org  
Phone (Cell): 661-478-9330 Phone (Home): N/A Phone (Office): N/A  
Resident (Voting) Address: [REDACTED] City: [REDACTED] ZIP: [REDACTED]  
Office Address: N/A City: N/A ZIP: N/A

**Information of Treasurer or Person Completing This Form on Behalf of the Statewide Officer (If Applicable)**

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Phone (Cell): \_\_\_\_\_ Phone (Home): \_\_\_\_\_ Phone (Office): \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Pursuant to California Democratic Party (CDP) Bylaws, Article II, Section 12, on Conflict of Interest Disclosure:**

a. A member of This Committee must disclose to other Members of This Committee while addressing a Convention, Executive Board Meeting, or through written disclosure when communicating through mail, e-mail, or other digital communication, primarily directed towards members of This Committee, that said member, the spouse of the member, or the domestic partner of the member has a material financial interest in advocating for or against a candidate for State or Federal Office or one or more state initiatives if said oral or written communication relates to the material financial interest.

b. For purposes of this section, a "financial interest in advocating for or against a candidate or one or more state initiatives" exists when the member or the spouse/domestic partner of the member:

- (1) is a candidate for the public office under consideration; or
- (2) is a paid employee or independent contractor of a political committee or owner, paid employee or independent contractor of a consulting firm which is taking a position for or against one or more candidates or state initiatives under consideration; or
- (3) is an employee who serves or works in paid employment at the pleasure of a person standing for election to the office under consideration; provided, however, that nothing in this rule shall require any person serving on a non-salaried basis as an appointee to a public panel, board or commission to make such disclosure; or
- (4) otherwise receives monetary compensation for the purposes of taking a position for or against one or more candidates or state initiatives under consideration.

c. A financial interest is "material" when it has a value of \$1,000 or more in a calendar year.

d. Disclosure shall be accomplished by stating verbally, when speaking, or in the communication itself when doing so through mail, e-mail, or other digital communication, primarily directed towards members of This Committee, the material financial interest the member of This Committee has in the candidates or state initiatives under consideration.

e. Statewide Officers of This Committee shall be required to file quarterly financial disclosures statements (promulgated by the Rules Committee), itemizing any compensation constituting a material financial interest as defined herein, and shall file a "Notice of Acquisition of Material Financial Interest" within fifteen (15) days of acquiring same.

f. Such quarterly financial disclosure statements shall be filed with the CDP Office, no later than the 15th of the month after the end of each quarter, available upon request, with each Statewide Officer's current disclosure statement made available on the CDP website, within 48 hours of filing.

**Financial Interest Disclosure (Entry 1)**

Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

Financial Interest Applicable to (Check all that apply):  The Statewide Officer  The Statewide Officer's Spouse or Domestic Partner

Nature of Financial Interest Activity (Check all that apply):

The Statewide Officer, or the Statewide Officer's Spouse or Domestic Partner is a:

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**Financial Interest Disclosure (Entry 2)**

Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

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**Financial Interest Disclosure (Entry 3)**

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The statements in this document and those in any attachment(s) are true and correct. I understand that my filing will be made available on the CDP website within 48 hours of filing.



Diana Love

Print Full Name

01/01/2024

Date

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**General Information**

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**Type of Filing (Please check the appropriate box):**

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Filing Year: \_\_\_\_\_

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- Quarter 1 (January – March)  
 Quarter 2 (April – June)  
 Quarter 3 (July – September)  
 Quarter 4 (October – December)

**Statewide Officer Information**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone (Cell): \_\_\_\_\_ Phone (Home): \_\_\_\_\_ Phone (Office): \_\_\_\_\_

City: \_\_\_\_\_ ZIP: \_\_\_\_\_

Office Address: \_\_\_\_\_

**Information**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone (Cell): \_\_\_\_\_ Phone (Home): \_\_\_\_\_ Phone (Office): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

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CDP Bylaws accessible online at: [www.cadem.org/our-party/by-laws](http://www.cadem.org/our-party/by-laws)

**Financial Interest Disclosure (Entry 1)**

Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

Financial Interest Applicable to (Check all that apply):  The Statewide Officer  The Statewide Officer's Spouse or Domestic Partner

Nature of Financial Interest Activity (Check all that apply):

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**Financial Interest Disclosure (Entry 2)**

Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

Financial Interest Applicable to (Check all that apply):  The Statewide Officer  The Statewide Officer's Spouse or Domestic Partner

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Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

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The statements in this document and those in any attachment(s) are true and correct. I understand that my filing will be made available on

[Redacted Signature]

Print Full Name

Date

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(Page 1 of 2)

**General Information**

Filing Date (mm/dd/yy): 01/03/2024 CDP Position: Vice Chair

**Type of Filing (Please check the appropriate box):**

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Filing Year: 2023

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- Quarter 1 (January – March)  
 Quarter 2 (April – June)  
 Quarter 3 (July – September)  
 Quarter 4 (October – December)

**Statewide Officer Information**

Name: Beth T. Yee Email: beth@cadem.org

Phone (Cell): [REDACTED] Phone (Home): N/A Phone (Office): N/A

Resident (Voting) Address: [REDACTED] City: [REDACTED] ZIP: [REDACTED]

Office Address: None City: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Information of Treasurer or Person Completing This Form on Behalf of the Statewide Officer (If Applicable) N/A**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone (Cell): \_\_\_\_\_ Phone (Home): \_\_\_\_\_ Phone (Office): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

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**Financial Interest Disclosure (Entry 1)**

*No financial interests to disclose.*

Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

Financial Interest Applicable to (Check all that apply):  The Statewide Officer  The Statewide Officer's Spouse or Domestic Partner

Nature of Financial Interest Activity (Check all that apply):

The Statewide Officer, or the Statewide Officer's Spouse or Domestic Partner is a:

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**Financial Interest Disclosure (Entry 2)**

Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

Financial Interest Applicable to (Check all that apply):  The Statewide Officer  The Statewide Officer's Spouse or Domestic Partner

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**Financial Interest Disclosure (Entry 3)**

Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

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The statements in this document and those in any attachment(s) are true and correct. I understand that my filing will be made available on the internet.

[Redacted Signature]

*Beth T. Yee*

*1/3/2024*

Signature of Statewide Officer

Print Full Name

Date

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(Page 1 of 2)

**General Information**

Filing Date (mm/dd/yy): 1/10/24 CDP Position: Chair

**Type of Filing (Please check the appropriate box):**

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Notice of Acquisition of Material Financial Interest (Due 15 days after acquiring)

Filing Year: 2024

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Quarter 1 (January – March)

Quarter 2 (April – June)

Quarter 3 (July – September)

Quarter 4 (October – December)

**Statewide Officer Information**

Name: Rusty Hicks Email: rustyhicks@gmail.com

Phone (Cell): [REDACTED] Phone (Home): \_\_\_\_\_ Phone (Office): \_\_\_\_\_

Resident (Voting) Address: [REDACTED] City: [REDACTED] ZIP: [REDACTED]

Office Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Information of Treasurer or Person Completing This Form on Behalf of the Statewide Officer (If Applicable)**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone (Cell): \_\_\_\_\_ Phone (Home): \_\_\_\_\_ Phone (Office): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

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**Financial Interest Disclosure (Entry 1)**

Candidate/State Initiative Promoted or Opposed: Campaign for a Safe and Healthy California (support

Name of Financial Interest Source: Advocacy Action Fund, Inc and the Center for Biological Diversity

Date Financial Interest Source Acquired: July 1, 2023

Financial Interest Applicable to (Check all that apply):  The Statewide Officer  The Statewide Officer's Spouse or Domestic Partner

Nature of Financial Interest Activity (Check all that apply):

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**Financial Interest Disclosure (Entry 2)**

Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

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**Financial Interest Disclosure (Entry 3)**

Candidate/State Initiative Promoted or Opposed: \_\_\_\_\_

Name of Financial Interest Source: \_\_\_\_\_

Date Financial Interest Source Acquired: \_\_\_\_\_

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\_\_\_\_\_

Signature of Statewide Officer

Rusty Hicks \_\_\_\_\_

Print Full Name

1/10/24 \_\_\_\_\_

Date